

File Date: 1-31-08

Case No: 07cv 6132

ATTACHMENT #

EXHIBIT 7

TAB (DESCRIPTION)

Exhibit 7

Jose Andreu's Answers to UPS First Interrogatories

**IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

JOSE ANDREU,)	
)	
Plaintiff,)	
)	
v.)	Case No. 07 C 00473
)	
UNITED PARCEL SERVICE, INC.,)	Judge Samuel Der-Yeghiayan
)	
Defendant.)	Magistrate Judge Mason

**PLAINTIFF'S ANSWERS AND OBJECTIONS TO
DEFENDANT'S FIRST SET OF INTERROGATORIES**

Plaintiff, JOSE ANDREU, by and through his attorneys, THE COFFEY LAW OFFICE, P.C., pursuant to Rules 26 and 33 of the Federal Rules of Civil Procedure, answers and objects to Defendant's First Set of Interrogatories as follows:

INTRODUCTION and GENERAL OBJECTIONS

The responses below are made solely for the purpose of and in relation to this action. Each response is given subject to all appropriate objections including, but not limited to, objections based on competency, relevancy, materiality and admissibility, which would require the exclusion of the interrogatory and/or response, or any statements contained herein if the interrogatory were asked of, or any statement contained herein were made by, a witness present and testifying in court. All objections and grounds therefore are specifically reserved by Plaintiff, and may be interposed at, or before, the time of trial in this matter.

The following responses are based on the present state of Plaintiff's investigation, discovery, preparation, and analysis of the facts, issues and evidence pertaining to this

case, which are incomplete as of the date of the responses. The responses are, therefore, given without prejudice to Plaintiff's right to amend the responses and/or produce at the time of trial and any of the following: currently known information which has been omitted from these responses as a result of good faith oversight; subsequently discovered information, evidence, and documentation relating to proof of presently known material facts; and, information, evidence, and documentation, whenever it is discovered, relating to proof of subsequently discovered material facts.

Plaintiff's responses to Defendant's interrogatories are based upon his reasonable interpretation thereof. If Defendant subsequently asserts interpretations of the interrogatories which differ from that applied by Plaintiff, then Plaintiff reserves the right to supplement his responses. Except for the explicit facts set forth in these responses, no admission of any nature whatsoever is implied, or is inferred, or should be inferred, from Plaintiff's responses, or from the fact that Plaintiff has responded. The fact that Plaintiff has responded shall not be taken as an admission, or as a concession of the existence of any facts set forth or assumed by the interrogatories.

The following general objections pertain to Defendant's First Set of Interrogatories directed to Plaintiff (its "Instructions and Definitions" as well as each Interrogatory), unless otherwise specified:

- A. Plaintiff objects to the Interrogatories to the extent they require Plaintiff to undertake any duty other than duties imposed by the Federal Rules of Civil Procedure and the local rules of this Court.
- B. Plaintiff objects to the Interrogatories to the extent they call for the production of documents, things or information protected from disclosure by the

attorney-client privilege, the attorney work product privilege, or otherwise protected from disclosure under applicable privileges, laws or rules.

- C. Plaintiff objects to the Interrogatories to the extent they seek to obligate the Plaintiff to make inquires beyond the parties to this action, or to the extent they pertain to documents, things or information not in the custody of the Plaintiff.
- D. Plaintiff objects to the Interrogatories to the extent they are unduly burdensome in that they call for material which is unreasonably cumulative or duplicative of material or information already provided or already within Defendant's custody or equally accessible to Defendant as it is to Plaintiff, or to the extent they require Plaintiff to incur unreasonable burden or expense in ascertaining the information or providing the documents.
- E. Plaintiff objects to the Interrogatories to the extent they seek documents, things or information that are not relevant to the subject matter of this lawsuit, or appear not to be reasonably calculated to lead to the discovery of admissible evidence.
- F. Plaintiff objects to the Interrogatories to the extent they seek every fact, or "any and all" facts, all reasons, or "any and all reasons," the identity of every witness, or the specification of every document supportive of or related to any claim or allegation on the grounds they are overly broad and place an undue burden on Plaintiff. *Lawrence v. First Kansas Bank & Trust Co.*, 169 F.R.D. 657, 662-63 (D.Kan. 1996).

ANSWERS AND OBJECTIONS TO INTERROGATORIES

Interrogatory No. 1: Identify each and every person (per instruction 8(a) above) whom Plaintiff believes possesses knowledge of any facts or circumstances which refer or relate to any of the allegations in Plaintiff's Complaint, and for each person identified, describe the knowledge plaintiff believes said person possesses.

Answer: Subject to and without waiving his general objections stated above, Plaintiff refers Defendant to the persons listed and information described in the parties' respective Rule 26(a)(1) initial disclosures in this matter.

Plaintiff's investigation and discovery into this matter continues.

Interrogatory No. 2: Describe in detail each and every act during Plaintiff's employment with UPS which he alleges constitutes retaliation against him for filing a workers compensation claim including, but not limited to, the identity (per instruction 8(a) above) of the alleged actor(s), the date(s) of each alleged act(s), and the identity (per instruction 8(b) above) of any documents which relate to each alleged act.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it asks him to form a legal conclusion regarding "each and every act" that may have constituted illegal retaliation against him. He also objects to the extent the interrogatory asks him to speculate as to the identity of each person who may have been responsible for, or in any manner involved with, retaliating against him, the dates of all of Defendant's retaliatory acts against him, and the identity of all documents related to all of Defendant's retaliatory acts against him. At this point in the litigation he cannot and does not know all such information.

Answer: Subject to and without waiving his objections, Plaintiff believes Defendant's decision to place him on notice of termination for alleged dishonesty, and subsequent decision to terminate his employment for the same alleged dishonesty were retaliatory acts against him because he engaged in the protected activities described in the Complaint. Additionally, Defendant may have retaliated against Plaintiff in other ways because he engaged in the protected activities described in the Complaint including, but not limited to, Defendant's claim that Plaintiff did not submit a timely grievance, and Defendant's late issuance of its COBRA notice.

Plaintiff's investigation and discovery into this matter continues.

Interrogatory No. 3: State with specificity the identity (per Instruction 8(a) above) of each and every person with whom you communicated and/or complained, regarding any alleged act of retaliation for filing a workers compensation claim during your employment with UPS, and state the date of each communication and/or complaint, the identity of the person to whom you communicated and/or complained, the substance of the communication and/or complaint, the identity (per Instruction 8(a) above) of any person who witnessed or overheard the communication and/or complaint and a description of what occurred or happened as a result of each communication and/or complaint.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it asks him to speculate as to the identity of each person who witnessed any part of the communications he had regarding Defendant's acts of retaliation against him. At this point in the litigation he cannot and does not know all such information.

Answer: Subject to and without waiving her objections, Plaintiff answers that he communicated with and/or complained about being placed on notice of termination to numerous people during his employment with UPS including, but not limited to, his wife Jill Andreu, Kerry Snyder, Dave Ziltz, Pam Treadwell, Ken Emanuelson, and Rick Cantu.

Plaintiff's investigation and discovery into this matter continues.

Interrogatory No. 4: State the entire factual basis in support of your claim that "On or about January 24, 2005, Jose injured his back at work while on his assigned route delivering packages" (Complaint ¶ 9) including, but not limited to, what you were doing, the time and location of the incident.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that seeks information neither relevant to the subject matter of this action nor reasonably calculated to lead to the discovery of admissible evidence.

Answer: Subject to and without waiving his objections, Plaintiff answers that on the morning of January 24, 2005, he was unloading packages in Aurora, Illinois, when he hurt his back.

Interrogatory No. 5: State the entire factual basis in support of your claim that "Upon meeting Jose out on his route, Mr. Ziltz stated to Jose that he believed Jose was lying about the work accident and/or related injuries, and faking his pain" (Complaint ¶ 11) including, but not limited to, the identity (per instruction 8(a) above) of all witnesses to the alleged incident.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it asks him to speculate as to the "entire factual basis" that may support his claim set forth at Par. 11 of his Complaint. At this point in the

litigation he cannot and does not know all facts that may support such claim, or the identity of each person who may have witnessed Mr. Ziltz make such statements.

Answer: Subject to and without waiving his general objections stated above, Plaintiff answers that this is what Mr. Ziltz said to Plaintiff when he met him out on his route on January 24, 2005.

Plaintiff's investigation and discovery into this matter continues.

Interrogatory No. 6: State the entire factual basis in support of your claim that "At various times subsequent to January 24, 2005, Mr. Ziltz repeated his assertions and belief that Jose was lying about the work accident and/or related injuries, and faking his pain" (Complaint ¶ 12) including, but not limited to, the date(s), time(s) and location(s) of each alleged incident and the identity (per Instruction 8(a) above) of all witnesses to each alleged incident.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it asks him to speculate as to the "entire factual basis" that may support his claim set forth at Par. 12 of his Complaint. At this point in the litigation he cannot and does not know all facts that may support such claim, the identity of each person who may have witnessed Mr. Ziltz make such statements, or all dates, times and locations of all such statements by Mr. Ziltz.

Answer: Subject to and without waiving his general objections stated above, Plaintiff answers that this is what Mr. Ziltz said to him at various times after his January 24, 2005 work accident and injury and prior to his March 4, 2005 termination.

Plaintiff investigation and discovery into this matter continues.

Interrogatory No. 7: State the entire factual basis regarding the "earlier communication Jose had with the Addison facility" (Complaint ¶ 21) including, but not limited to, the time of the communication, the nature and/or method of the communication, the substance of the communication, and the identity (per instruction 8(a) above) of the individuals you communicated with.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it asks him to speculate as to the "entire factual basis" that may support his claim set forth at Par. 21 of his Complaint. At this point in the litigation he cannot and does not know all facts regarding this communication. Plaintiff also objects to this Interrogatory on the grounds that it seeks information exclusively in the possession of Defendant.

Answer: Subject to and without waiving his objections, Plaintiff answers that at approximately 3:00 p.m. on February 9, 2005, he received a text message on his hand-held DIAD (i.e., Delivery Information Acquisition Device) advising him to break his route and go make a pick up at Bernina in Aurora. He promptly responded, received a reply, then responded again. In his second response, Plaintiff estimated that he had approximately 60 stops left. Plaintiff does not know the identity of the person or persons who sent the text messages.

Plaintiff's investigation and discovery into this matter continues.

Interrogatory No. 8: identify the number of packages you had on your package car on February 9, 2005 at the time you were involved in communication with UPS's Addison facility (Complaint ¶ 21), the time of his Ziltz's arrival and the number of packages you had

in your package car when Zilitz arrived (Complaint ¶ 21) and the time you complete your route on February 9, 2005.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it seeks information exclusively in the possession of Defendant.

Answer: Subject to and without waiving his objections, Plaintiff refers Defendant to his answer to Interrogatory No. 7, above. Plaintiff further answers that Mr. Zilitz arrived at his truck at approximately 4:45 p.m., at which point Plaintiff estimates that he had approximately 35 stops remaining.

Plaintiff's investigation and discovery into this matter continues.

Interrogatory No. 9: Fully explain whether or not you worked for UPS on Thursday, February 10, 2005 and, if so, identify your duties that day, the route you drove if any in your hours for that day.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it seeks information neither relevant to the subject matter of this action nor reasonably calculated to lead to the discovery of admissible evidence. Plaintiff also objects to this interrogatory on the grounds that it seeks information exclusively in the possession of Defendant.

Answer: Subject to and without waiving his objections, Plaintiff believes he reported to work on February 10, 2005, but is not certain what his duties, route or hours were that day.

Interrogatory No. 10: State whether you were put on notice of termination in February 2005 and whether or not you submitted a grievance concerning being told you would be fired or been given notice of termination and, if so, state the date you submitted

the grievances, identify (per instruction 8(a) above) the individual(s) with either UPS or Teamsters Local 705 you submitted the grievance to or discussed it with, and each and every date including time and location you met with representatives of Local 705 and/or UPS concerning your grievance and identify (per instruction 8(a) above) the individual(s) whom you met or discussed the grievance with.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that seeks information neither relevant to the subject matter of this action nor reasonably calculated to lead to the discovery of admissible evidence. Plaintiff also objects to this interrogatory on the grounds that its seeks information already in the possession of Defendant and/or Teamsters Local 705, in which case it is equally accessible/available to Defendant.

Answer: Subject to and without waiving his objections, Plaintiff refers Defendant to the copies of documents produced by Local 705 in connection with this matter which were previously served on its counsel. Plaintiff also refers Defendant to documents bates stamped P000042, and P000314 to P000315.

Plaintiff further answers that he was put on notice of termination in February 2005, and that he believes Teamsters Local 705 filed a grievance with Defendant on his behalf related to the notice of termination. He has discussed this grievance with Teamsters Local 705 employees and/or agents including Pam Treadwell, whom he believes was a union steward at the time, and union representative Ken Emanuelson. Further, he attended a meeting with Ms. Treadwell and Kerry Snyder in February 2005, and he subsequently appeared before the UPS/Local 705 joint grievance committee on or about March 15, 2006.

Plaintiff's investigation and discovery into this matter continues.

Interrogatory No. 11: State the entire factual basis in support of your claim that "On March 4, 2005, Jose's superior, Kerry Snyder, told Jose that his employment the UPS was terminated effective immediately for alleged (sic) being dishonest on February 9, 2005". (Complaint ¶ 23)

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it asks him to speculate as to the "entire factual basis" that may support his claim set forth at Par. 23 of his Complaint. At this point in the litigation he cannot and does not know all facts that may support such claim.

Answer: Subject to and without waiving his objections, Plaintiff answers that this is what Mr. Snyder said to him on March 4, 2005.

Plaintiff's investigation and discovery into this matter continues.

Interrogatory No. 12: State the entire factual basis in support of your claim that "Jose's protected activities under the Act were a motivating factor behind UPS' decision to terminate his employment." (Complaint ¶ 29)

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it asks him to speculate as to the "entire factual basis" that may support his claim set forth at Par. 29 of his Complaint. At this point in the litigation he cannot and does not know all facts that may support such claim. Plaintiff also objects to this interrogatory on the grounds it is a premature contention interrogatory, and it is unduly burdensome and overly broad.

Answer: Subject to and without waiving his general objections stated above, Plaintiff answers that all facts alleged in his Complaint and in Defendant's amended answer, as

well as all facts set forth in the parties' discovery responses and document production may support his claim set forth at Par. 29 of his Complaint.

Plaintiff's investigation and discovery into this matter continues.

Interrogatory No. 13: State the entire factual basis in support of your claim that "Between October 31, 2005 and his receipt of the COBRA notice, Jose received medical treatment and incurred related to medical expenses in reliance on what he reasonably believed to be continued coverage under the Plan" (Complaint ¶ 41) and identify (per instruction 8(b) above), all documents related to the "medical treatment and incurred related medical expenses" referenced.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it asks him to speculate as to the "entire factual basis" that may support his claim set forth at Par. 41 of his Complaint. At this point in the litigation he cannot and does not know all facts that may support such claim.

Answer: Subject to and without waiving his objections, Plaintiff refers Defendant to documents bates stamped 000001 to 000009 previously produced to its counsel in this matter on April 24, 2007, as well as documents bates stamped P000028 to P000041, P000194 to P000214. Plaintiff further states that prior to undergoing an MRI on his hip in January 2006, he called Defendant's insurance company to verify coverage prior to incurring such costs, and the insurance company in fact confirmed that he was covered.

Plaintiff's investigation and discovery into this matter continues.

Interrogatory No 14: Describe in detail any physical, mental or emotional injuries you claimed to have suffered as a result of the conduct alleged in your Charge and/or Complaint and state: a description of all physical, mental or emotional injuries you claimed

to have suffered, the nature of each such injury in the area of your body affected, when the each symptom of such injury first manifested itself, whether you still have any such symptom that you attribute to UPS' conduct, if you still have any such symptom please describe it in full, including but not limited to, a description of the symptom, whether it is subsiding, remaining the same, or becoming worse, and the frequency and duration of the symptom.

Answer: Subject to and without waiving his general objections stated above, as a result of Defendant illegal acts in this matter Plaintiff suffered from a variety of emotional and physical injuries and pain, including but not limited to, worry, embarrassment, depression, fear, betrayal, harassment, anger, anxiety, loss of self-esteem/self-worth, financial stress, family discord, sleeplessness, and headaches. These injuries commenced when David Ziltz falsely accused Jose of lying on February 9, 2005, were subsequently aggravated by Defendant's illegal acts as set forth in his Complaint, and continue to date.

Plaintiff's investigation and discovery into this matter continues.

Interrogatory No. 15: Identify (per Instruction 8(a) above) each of Plaintiff's employers since October 2001, other than UPS, and with respect to each employer, state: the name, address and telephone number of each employer, the date employment commenced, all job titles or job categories held by Plaintiff, the rate of pay received by Plaintiff for each job title or job category, the number of hours worked by Plaintiff each week or each month, the gross amount earned, the date employment was terminated, the reason for termination, and the identity (per Instruction 8(a) above) of the person(s) responsible for the termination of employment, if applicable.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it seeks information neither relevant to the subject matter of this action nor reasonably calculated to lead to the discovery of admissible evidence.

Answer: Subject to and without waiving his objections, Plaintiff states that since October 2001, in addition to UPS, he has been employed by Bedford Motor Service Inc., 5921 W. 65th Street, Bedford Park, IL, as a driver from on or about 2002 to 2003, at an hourly rate of \$15.00. Plaintiff is not certain how many hours he worked in any given week or month, or how much income he earned from this employment in 2002. In 2003, he earned \$26,131. Plaintiff quit this employment in or around September 2003, when he commenced full-time seasonal employment with UPS.

Further, he has been employed since on or about October 2005 with J&J Tee Service Co. He is the president and part owner of this company. To date, the company has not paid salaries or wages to Plaintiff.

Plaintiff's investigation and discovery into this matter continues.

Interrogatory No. 16: Identify (per Instruction 8(a) above) each and every medical doctor, social worker, psychologist, psychiatrist, therapist or other medical or health care professional who diagnosed or treated Plaintiff for any injury, illness, condition or disability allegedly caused by UPS. Your response should include: the date(s) Plaintiff was treated, and a full description of condition treated or diagnosed, and the identity (per Instruction 8(b) above) of any documents related to the condition treated or diagnosed.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it seeks confidential and privileged information protected from discovery in this matter by Plaintiff's physician-patient privilege. He also objects on

the grounds that this interrogatory seeks information neither relevant to the subject matter of this action nor reasonably calculated to lead to the discovery of admissible evidence.

Answer: Subject to and without waiving his objections, and subject to the Agreed Protective Order entered by the Court in this matter on June 14, 2007, and limited to injuries resulting from the illegal acts of Defendant complained of in this action, Plaintiff states that he has not sought medical care or treatment for the injuries he suffered from the illegal acts of Defendant complained of in this action.

Interrogatory No. 17: Not including any medical professionals identified in response to Interrogatory No. 17, identify (per Instruction 8(a) above) each and every medical doctor, social worker, psychologist, psychiatrist, therapist or other medical or health care professional who diagnosed or treated plaintiff for any physical, mental, emotional and psychological condition since January 1, 1994, including any court-ordered exams. Your response should include: the dates that Plaintiff was treated, a full description of condition treated or diagnosed, and the identity (per Instruction 8(b) above) of any documents related to the diagnosis or treatment.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it seeks confidential and privileged information protected from discovery in this matter by Plaintiff's physician-patient privilege. He also objects on the grounds that this interrogatory seeks information neither relevant to the subject matter of this action nor reasonably calculated to lead to the discovery of admissible evidence.

Answer: Subject to and without waiving his objections, and subject to the Agreed Protective Order entered by the Court in this matter on June 14, 2007, Plaintiff refers

Defendant to the confidential medical records he has produced in connection with this action bates stamped 000001 to 000009, P000044 to P000179, and P000194 to P000258.

Interrogatory No. 18: Identify each person who you expect to call as an expert witness at trial, if any, and has to each potential expert identified include: subject matter of which expert is expected to testify, a complete statement of all opinions to which expert is expected to testify and be expressed, and bases, reasons and grounds therefor, the data and other information considered by the witness in forming the opinions, the qualifications of the witness, including a list of all publications authored by the witness within the preceding 10 years; the compensation to be paid for the study and testimony, and a listing of any other cases in which the witness has testified as an expert at trial or by deposition within the preceding four years.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it is premature and in conflict with the Court's order of June 14, 2007. Per the June 14, 2007 order, Plaintiff is not required to disclose his experts and produce related information until July 16, 2007.

Interrogatory No. 19: Describe all sources of money received by Plaintiff since October 16, 2001, including the amount of money from each source and the dates of the payments. Money includes, but is not limited to, compensation, salary, bonuses, retirement benefits, social security payments, disability payments, unemployment compensation benefits, workers' compensation benefits, as well as financial gifts from relatives and friends. Your response need not include salary received from UPS or other employers identified in response to Interrogatory No.16 if you included salary information in your response.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it seeks confidential information. He also objects on the grounds that this interrogatory seeks information neither relevant to the subject matter of this action nor reasonably calculated to lead to the discovery of admissible evidence.

Answer: Subject to and without waiving his objections, and subject to the Agreed Protective Order entered by the Court in this matter on June 14, 2007, Plaintiff refers Defendants to copies of documents bates stamped P000300, P000304, and P000309. Plaintiff further answers that he continues to attempt to gather this information, and will supplement his answer if and when he is able to secure any of the requested information.

Plaintiff's investigation and discovery into this matter continues.

Interrogatory No. 20: Describe all attempts by plaintiff, if any, to secure employment since October 16, 2001, including, but not limited to the following: the identity (per Instruction 8(a) above) and address of the potential employer; each person contacted, method of inquiry (e.g. application, resume, etc.), and position sought; whether or not Plaintiff was offered employment, and if Plaintiff was not offered employment, but what reason was given; if Plaintiff was offered, but did not accept employment, the reason why; and if Plaintiff except employment is no longer employed with that employer, the date and reason why the employment terminated. For any period since October 16, 2001 in which Plaintiff alleges he was unable to seek, obtain or hold employment state the reason(s) for the alleged inability to seek, obtain or hold employment.

Objection: In addition to his general objections stated above, Plaintiff objects to this interrogatory on the grounds that it seeks confidential information. He also objects on the

grounds that this interrogatory seeks information neither relevant to the subject matter of this action nor reasonably calculated to lead to the discovery of admissible evidence.

Answer: Subject to and without waiving his objections, Plaintiff refers Defendant to documents bates stamped P000259 to P000272. He further answers that he continues to attempt to gather this information, and will supplement his answer if and when he is able to secure any of the requested information.

Plaintiff's investigation and discovery into this matter continues.

Interrogatory No. 21: Identify all relief sought by you in this action, whether injunctive, monetary or some other form of relief, by description of alleged damages claims, date incurred, amount of damage claimed to date, and method of calculating monetary damages.

Answer: Subject to and without waiving his general objections stated above, Plaintiff refers Defendant to the damages itemized at his Rule 26(a)(1) initial disclosures in this matter.

Plaintiff's investigation and discovery into this matter continues.

Dated: June 22, 2007

Respectfully Submitted,
JOSE ANDREU, Plaintiff,

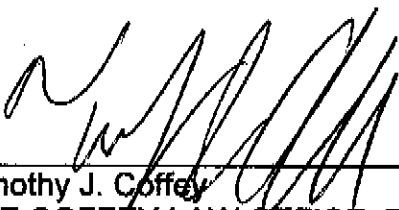
By: 

Timothy J. Coffey
THE COFFEY LAW OFFICE, P.C.
Attorneys for JOSE ANDREU
1403 E. Forest Avenue
Wheaton, IL 60187
(630) 534-6300

CERTIFICATION OF SERVICE

I hereby certify that I served a true, accurate and complete copy of the foregoing Plaintiff's Answers and Objections to Defendant's First Set of Interrogatories to the following attorneys of record for Defendant by first-class, U.S. mail, postage pre-paid, on the 23rd day of June, 2007.

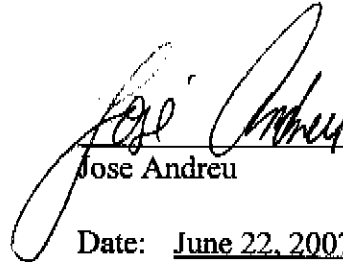
D. Scott Watson
Quarles & Brady LLP
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Suite 3700
Chicago, IL 60661



Timothy J. Coffey
THE COFFEY LAW OFFICE, P.C.
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VERIFICATION

I, Jose Andreu, verify that the answers set forth above in Plaintiff's Answers and Objections to Defendant's First Set of Interrogatories are true and correct to the best of my knowledge and belief based on the information I have available to me to date.



Jose Andreu
Date: June 22, 2007

Exhibit 8

Jose Andreu Declaration

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my inside overhead door, opened the door and entered cargo area of my truck. He continued to accuse me of lying and saying that I would be fired the next day. At no point did I see or hear him count the packages that were in the cargo area. At no point did he say he counted 20 packages or any number of packages. At no point did he mention Ms. Cheryl Bast, or anything about me telling her I had 60 stops or packages left in my car.

5. I did not lie about the number of packages I had in my truck on February 9, 2005, and I have never admitted to Kerry Snyder, or anyone for that matter that I in fact told such a lie on that day.
6. I was not placed on medical work restrictions until I returned to work on February 17, 2005, after being out of work the preceding few days and receiving medical treatment at Turner Pain and Wellness Center due to the pain I was experiencing from the injuries I sustained in my January 24, 2005, work accident.
7. The copies of the Turner Pain Clinic documents, P000241-47, submitted as Exhibit 13 of my response in opposition to UPS's motion for summary judgment are true and correct copies of my medical records from Turner. On February 14, 2005, I personally delivered Dr. Ahern's handwritten note, a copy of which is at P000247, to Kerry Snyder. The following day, I again personally delivered Dr. Ahern's handwritten note, a copy of which is at P000243, to Kerry Snyder.

Pursuant to 28 U.S.C. § 1746, I certify under penalty of perjury that the foregoing is true and correct.

Dated: January 28, 2008

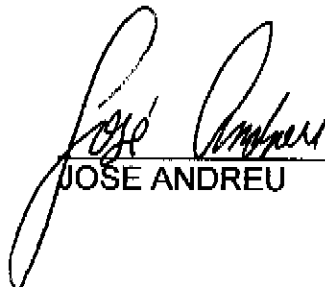

JOSE ANDREU

Exhibit 9

Jose Andreu UPS Personnel File, UPS 0001 - 0041



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February 20, 2006

VIA UPS NEXT DAY AIR

Timothy J. Coffey, Esq.
Robin Potter & Associates, P.C.
111 East Wacker Drive
Suite 2600
Chicago, IL 60601

Re: Jose Andreu
Request For Personnel File

Dear Mr. Coffey:

As requested, enclosed is a copy of Jose Andreu's personnel file that is stamped
UPS 0001 – UPS 0041.

Very truly yours,

A handwritten signature in dark ink, appearing to read "J. A. Klages".

John A. Klages

JAK:ms
Enclosure

February 9, 2005

To: Dave Ziltz
From : Cheryl Bast

RE: Jose Andreu

We asked Jose Andreu to make a pick up at Bernina. He called at 16:00 to ask if we wanted him to break off of his route to go get it. I told him yes. He then stated that he had 60 stops left and he would not be done until 9:00pm. I told him that if he were to do 20 stops an hour that he should be done by 7. He said he was 20 minutes from Bernina and this would take up quite a bit of time.

At 16:42 I received a call from Dave Ziltz he had just met Jose at Bernina. Dave counted the stops in his truck and he only had 20 stops left.

UPS 0001



To: Randy Dunn
Fr: Kerry Snyder
Re: Jose Andreu Discharge

3/24/05

On 2/10/05 at 8:25 I held a meeting in my office for the discharging of service provider Jose Andreu. I informed Andreu that he was on notice of termination for violation of article 54 of the contract referring to honesty. Present during the discharge discussion was UPS Supervisor Dave Ziltz, Service provider Jose Andreu, and Union Steward Pam Treadwell.

The following day Jose Andreu reported an on the job injury. He continued to work for us with restrictions. The union did not grieve the notice of discharge, once the time had lapsed to grieve the notice of discharge he was terminated.

UPS 0002

United Parcel Service Employee History Profile

Employee Name: Andreu, Jose

Employee ID Number: 0113260

Employment Date: 09/18/1996

Race: HIS

Gender: M

Grade: 000

****To change personal information go to UPSers.com or your local HR office. To make job related changes, complete the appropriate GEMS form.*

GEMS Job History (Starts from Mar 1999)

Region	District	Job Change Reason	Start Date	Job Class	Job Group/Description
02 - North Central	46 - North Illinois	TER/VJO	10/21/2005	PACKAGE DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	RFL/RFL	10/21/2005	PACKAGE DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	DTA/CHE	08/01/2005	PACKAGE DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	LOA/WCP	03/10/2005	PACKAGE DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	DTA/CHD	01/29/2004	PACKAGE DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	JRC/JRC	01/19/2004	PACKAGE DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	DTA/CHD	01/15/2004	BID AIR DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	JRC/JRC	12/29/2003	BID AIR DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	DTA/CHD	11/13/2003	PACKAGE DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	JRC/JRC	11/03/2003	PACKAGE DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	DTA/CHD	07/24/2003	BID AIR DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	JRC/JRC	07/14/2003	BID AIR DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	DTA/CHD	07/02/2003	PACKAGE DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	JRC/JRC	06/24/2003	PACKAGE DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	DTA/LOC	08/31/2002	BID AIR DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	JRC/JRC	12/05/1999	BID AIR DRIVER	PART TIME SUPERVISOR
02 - North Central	46 - North Illinois	JRC/JRC	05/21/1999	AIR DRIVER	PART TIME SUPERVISOR

Job History (Prior to Mar 1999)

Region	District	Job Change Reason	Start Date	Job Class	Type Employment
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United Parcel Service Employee History Profile

Employee Name: Andreu, Jose				Employee ID Number: 0113260	
02 - North Central	46 - North Illinois	Lateral	02/25/1997	SECONDARY SORTER	PT UNION HOURLY
02 - North Central	46 - North Illinois	Lateral	11/18/1996	LOADER/UNLOADER	PT UNION HOURLY
02 - North Central	46 - North Illinois	Lateral	10/19/1996	AIR DRIVER	PT UNION HOURLY
02 - North Central	46 - North Illinois	Start	09/18/1996	LOADER/UNLOADER	PT UNION HOURLY

Education		
Graduation Date	School	Major
		Education Level

Performance Appraisals		
Type	Start Date	End Date
Rating	Language	Translator
Speak	Read	Write

UPS Training		
Date	Description	Instructor

08/25/2005	HIGH RISK RE-CERTIFICATION	No
08/25/2005	INITIAL SECURITY AWARENESS TRN	No
02/03/2005	SPACE AND VISIBILITY	No
02/03/2005	SAFE WORK HABITS	No
01/06/2005	HAZ MAT TRNG - OPS 1 HR VIDEO	No
01/06/2005	CONVEYOR SECURING	No
06/25/2004	ONE VISION	No
02/03/2004	UPS SAFE BACKING PROC	No
02/03/2004	SAFE WORK HABITS	No
02/03/2004	SPACE AND VISIBILITY	No
01/06/2004	CONVEYOR SECURING	No
01/06/2004	HAZ MAT TRNG - OPS 1 HR VIDEO	No
06/30/2003	RETURN SERVICES CERTIFICATION	No

UPS 0004

United Parcel Service Employee History Profile

Employee Name: Andreu, Jose

Employee ID Number: 0113260

06/16/2003	UPS SAFE BACKING PROC	No
06/16/2003	SPACE AND VISIBILITY	No
06/16/2003	SAFE WORK HABITS	No
06/16/2003	SERV PROVID TRAINING SCHOOL	No
06/16/2003	CONVEYOR SECURING	No
06/16/2003	HAZ MAT TRNG - OPS 1 HR VIDEO	No
01/28/2003	SAFE WORK HABITS	No
01/28/2003	SPACE AND VISIBILITY	No
01/21/2003	OUR COMPANY VIDEO	No
01/09/2003	HAZ MAT TRNG - OPS 1 HR VIDEO	No
01/09/2003	CONVEYOR SECURING	No
11/04/2002	ERI FOLL/UP SESSION	No
08/01/2002	INT'L SHPMNT ACCEPTANCE TRNG	No
06/01/2002	LEGACY/PARTNERING PRESENTATION	No
04/01/2002	UPS SAFE BACKING PROC	No
02/01/2002	SAFE WORK HABITS	No
02/01/2002	SPACE AND VISIBILITY	No
01/01/2002	CONVEYOR SECURING	No
01/01/2002	HAZ MAT TRNG - OPS 1 HR VIDEO	No
01/01/2002	OUR COMPANY VIDEO	No
09/01/2001	LRNG MAP 5 - INVSTG TO GROW	No
10/01/2000	LRNG MAP 4 - ENBLG GLOBAL COMM	No
06/01/1997	UNDEL PKGE HDLING PROC 6/1997	No

Annual Employee Discussions

Career/Personal Development Discussion

Date

Date

Type

UPS 0005

**United Parcel Service
Employee History Profile**

Employee Name: Andreu, Jose		Employee ID Number: 0113260
Comments		
Human Resources Manager Signature		Date

UPS 0006



United Parcel Service

EMPLOYMENT APPLICATION
Driver and Mechanic Positions
(Use Black Ink Only)

OFFICE USE ONLY		
R	P	D
PRINT	DR	M

Region 012 District 416
☐ FOR APPLICANT USE ☐ FOR OFFICE USE

Social Security No.

Name (Last, First)

Middle (initial)

3151180119516ANDREW WLOSA

Applicant MUST SIGN last page of application

ADDRESS INFORMATION

Address

Apt. #

Phone # (include area code)

7831 W RUSCHER312 631 7331

City

State

Zip Code

Alternate Phone # (include area code)

CHICAGOIL 60654

PREVIOUS ADDRESSES: During the last three years, beginning with most recent.

Address 7831 W RUSCHER Apt. # HOUSEAddress 2835 N MASON Apt. # HOUSECity, State CHICAGO IL Zip Code 60654City, State CHICAGO IL Zip Code 60654**EMERGENCY CONTACT INFORMATION**

Name (Last, First)

ANDREW WLOSA

Address

Apt. #

Phone # (include area code)

7831 W RUSCHER312 631 7331

City

State

Zip Code

Alternate Phone # (include area code)

CHICAGOIL 60654312 631 7331**GENERAL INFORMATION**

Are you employed now?

☒ Yes☐ No

When can you begin work at United Parcel Service? _____

Would you accept night work?

☒ Yes☐ No

Do you have any relatives employed by United Parcel Service or any UPS subsidiary?

☐ Yes☒ No

Name _____ Location _____

Have you ever completed an application for employment at United Parcel Service or any UPS subsidiary?

☒ Yes☐ NoWhen LAST MONTH Where ABIGAIL

Have you ever been employed by United Parcel Service or any UPS subsidiary?

☒ Yes☐ No

When _____ Where _____

Position _____

Have you ever been convicted of a felony?

☐ Yes☒ No

NOTE: Disclosure of convictions does not automatically disqualify you from employment consideration.

If yes, give details _____

I am a U.S. Citizen or National of the U.S., an alien lawfully admitted for permanent residence, or an alien authorized to work in the U.S. for United Parcel Service.

☒ Yes☐ No

NOTE: Upon request, prior to commencement of employment, you must provide documents which establish your identity and authorization to work in the United States.

018127 1/82 (2AM 12/92)

UPS 0007

EDUCATION

	NAME OF SCHOOL	ADDRESS (City, State, Zip)	GRADUATED			COLLEGE MAJOR	CMC
			YES/NO	ELC	TYPE OF DEGREE		
HIGH SCHOOL	MEXICO	TELEGRAPH GPO	✓				
COLLEGE	TRITON College		no				
COLLEGE							
TECHNICAL, BUSINESS OR OTHER							

Are you attending school? ☐ Yes ☒ No If yes, # of credit hours? _____ Where? _____

Total credit hours to date _____

Cumulative Grade Point Average _____

SCHEDULE: Mon am to pm Tues am to pm Wed am to pm Thu am to pm Fri am to pm

PREVIOUS EMPLOYMENT

List any special job skills you possess: CDL Drivers Licence Good Record SPC 1 1 1

All time must be accounted for, whether employed or not. Do not include military service. List below the names of all your employers, beginning with the most recent.

a. COMPANY NAME, b. STREET, c. CITY, STATE, ZIP	COMPANY'S TELEPHONE NUMBER	EMPLOYED				POSITION	SALARY	NAME OF SUPERVISOR	REASON FOR LEAVING
		FROM		TO					
		MO	YR	MO	YR				
1. <u>WONG FINGER ARMED</u>	<u>9708</u> <u>592 72</u> <u>00</u>	<u>10</u>	<u>91</u>	<u>STILL</u>	<u>91</u>	<u>DENVER</u>	<u>7.75/hr</u>	<u>LARRY</u> <u>IRON</u>	<u>STILL</u> <u>AT</u> <u>PRESENT TIME</u>
2. a. _____ b. _____ c. _____									
3. a. _____ b. _____ c. _____									
4. a. _____ b. _____ c. _____									
5. a. _____ b. _____ c. _____									
6. a. _____ b. _____ c. _____									
7. a. _____ b. _____ c. _____									

*If more space is required, please notify the interviewer.

Are there any employers whom you
DO NOT wish us to contact? ☐ Yes ☒ No

Have you ever been discharged by a
previous employer? ☐ Yes ☒ No

If yes, when _____

Give details: _____

Have you collected Unemployment
Compensation within the last
five years? ☐ Yes ☒ No

Number of weeks
collected: _____

When? _____

U.S. MILITARY SERVICE

☐ Yes ☒ No

Branch _____

Date of first induction 1 / 1 / _____

Date of last separation 1 / 1 / _____

Specialty _____

Service schools _____

PERSONAL REFERENCES (other than relatives)

NAME	ADDRESS (INCLUDE CITY, STATE, & ZIP CODE)	TELEPHONE NUMBER
<u>Jose Frutos</u>	<u>2835 N. MARTIN</u>	<u>(312) 745-7582</u>
<u>Salvador Huerta</u>	<u>139 N. RIDGELAND</u>	<u>(708) 848-1281</u>

Why are you applying for a position with United Parcel Service?

Indicate whether you are looking for:

☐ Full-Time☐ Part-Time (less than 25 hours per week)Please explain your choice: Any THAT IS AVAILABLE AT THIS TIME
FULL-TIME IS OK**APPLICATION AGREEMENT**

In completing and signing this application for employment, and any supplements to this application, I understand that misrepresentation or omission of facts is cause for cancellation of this application or separation from the company's service if I am employed. I agree that the company shall not be liable in any respect if my employment is terminated because of the falsity of statements made by me on this application.

I understand further that information concerning my past record will be sought from my previous employers and other sources and I hereby release from all liability or damages those individuals, corporations, or organizations who provide such information. I understand any such information provided shall become the exclusive property of the company.

I also understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the COMPANY and myself or to provide any other benefit.

As a condition of my employment, I consent to taking a Department of Transportation medical examination and such future medical examinations as may be required by the COMPANY. I understand any offer of employment is conditional upon the results of such medical examinations.

This certifies that this application was completed by me, or at my direction, and that all entries on it and information in it are true and complete.

APPLICANT'S SIGNATUREDate 10/10/26

United Parcel Service will provide reasonable accommodation during the employment process, as well as on the job, if such an accommodation is requested by an applicant or employee. UPS invites applicants with disabilities to voluntarily identify themselves and discuss the accommodations that may be required.

FOR OFFICE USE ONLY

Interviewer _____ Date ____/____/____ Interviewer _____ Date ____/____/____

Employment Approved By _____ Date ____/____/____

Payroll Center _____ Job Title _____ D.O.E. _____



United Parcel Service of America, Inc.



United Parcel Service

OFFICE USE ONLY		
R 3	P H345	D 6032
LPT	QIR	M/I

Region 012 District 46

EMPLOYMENT APPLICATION

Part Time Positions

Social Security No.

Name (Last, First)

Middle Initial

359-80-1956Andrew Jose

Please Print

CURRENT ADDRESS INFORMATION

Address

Apt. #

Phone # (Include area code)

7831 W RoscherHouse312-631-2306

City

State Zip Code

Alternate Phone #

ChicagoIL 60656312-631-2306

PREVIOUS ADDRESSES: During the last three years, beginning with most recent.

Address 8835 N MasonApt. # House

Address

Apt. #

City, State ChicagoZip Code 60634

City, State

Zip Code

GENERAL INFORMATION

Are you employed now?

☒ Yes☐ NoWhen can you begin work at UPS? 09-12-96

Would you accept night work?

☒ Yes☐ No

Do you have relatives employed by United Parcel Service or any subsidiary?

☐ Yes☒ No

Have you ever completed an application for employment at United Parcel Service or any UPS subsidiary?

☒ Yes☐ NoWhen 1994Where United Parcel Service

Are you under 18 years of age?

☐ Yes☒ No

If yes, date of birth

Have you ever been employed by United Parcel Service or any UPS subsidiary?

☐ Yes☒ No

When

Where

Position

Have you ever been convicted of a felony?

☐ Yes☒ No

NOTE: Disclosure of convictions does not automatically disqualify you from employment consideration.

If yes, give details

I am a U.S. Citizen or National of the U.S., an alien lawfully admitted for permanent residence, or an alien authorized to work in the U.S. for United Parcel Service.

☒ Yes☐ No

NOTE: Upon request, prior to commencement of employment, you must provide documents which establish your identity and authorization to work in the United States.

Why are you applying for part-time work? Many Reasons I Need Part Time Money Also Health Ins

01810814 REV. 7/96

UPS 0011

EDUCATION

	NAME OF SCHOOL	ADDRESS (City, State, Zip)	GRADUATED		COLLEGE MAJOR
			YES/NO	TYPE OF DEGREE	
HIGH SCHOOL	General Andres	MEXICO GRO	Yes		
COLLEGE	Triton College				
TECHNICAL, BUSINESS OR OTHER					

Are you attending school? ☐ Yes ☐ No If yes, # of credit hours? _____ Where? _____
 Are you planning to attend school? ☐ Yes ☐ No
 Total credit hours to date _____ Cumulative Grade Point Average _____
 CLASS SCHEDULE: Mon _____ am _____ pm Tue _____ am _____ pm Wed _____ am _____ pm Thu _____ am _____ pm Fri _____ am _____ pm

PREVIOUS EMPLOYMENT

1	List below the names of the last two employers, beginning with the most recent. a. COMPANY NAME, b. STREET, c. CITY, STATE, ZIP	COMPANY'S TELEPHONE NUMBER	EMPLOYED				POSITION	SALARY	NAME OF SUPERVISOR	REASON FOR LEAVING
			FROM		TO					
			MO	YR	MO	YR				
1	Wells Fargo ARmed 6770 Paxton El Grove Illinois	704844 952.9700	10	91	11	91	DRIVER APM	810 HARRY IVIN	STILL THERE NOT LEAVING FUTURE LEAVING EX. FUTURE	
2	SALVADOR'S MEXICAN REST		10	83	10	91	waiter	GEORGE CASTELLANO		

Are there any employers whom you DO NOT wish us to contact? _____
 Have you ever been discharged by a previous employer? ☐ Yes ☒ No
 If yes, when _____
 Please explain the circumstances: _____

Have you collected Unemployment Compensation within the last five years? ☐ Yes ☒ No

Number of weeks collected: _____

When? _____

U.S. MILITARY SERVICE

☐ Yes ☒ No

Branch _____

Date of first induction _____

Date of last separation _____

Specialty _____

Service schools _____

NOTE: Upon request prior to commencement of employment you must provide a copy of DD214

APPLICATION AGREEMENT

In completing and signing this application for employment, and any supplements to this application, I understand that misrepresentation or omission of facts is cause for cancellation of this application or separation from the company's service if I am employed. I agree that the company shall not be liable in any respect if my employment is terminated because of the falsity of statements made by me on this application.

I understand further that information concerning my past record will be sought from my previous employers and other sources and I hereby release from all liability or damages those individuals, corporations, or organizations who provide such information. I understand any such information provided shall become the exclusive property of the company.

I also understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the company and myself or to provide any other benefit.

This certifies that this application was completed by me, or at my direction, and that all entries on it and information in it are true and complete.

APPLICANT'S SIGNATURE _____

Date 09/10/96

United Parcel Service will provide reasonable accommodation during the employment process, as well as on the job, if such an accommodation is requested by an applicant or employee. UPS invites applicants with disabilities to voluntarily identify accommodations that may be required.

FOR OFFICE USE ONLY			
Interviewer _____	Date 9/10/96	Interviewer _____	Date _____
Employment Approved By _____	Date 9/10/96		
Payroll Center _____	Job Title _____	DOE _____	



United Parcel Service

DELIVERY VEHICLE ROAD TEST REPORT

02/46

Name <u>Jose Andreu</u>		License Exp. Date <u>06/08/05</u>		Type Equipment <u>P800</u>	Date <u>6/19/03</u>
	Demerit	Demerit Count	Total	Remarks	
1 Starting Engine	6				
2 Starting Vehicle	10				
3 Gear Shifting	10				
4 Clutch	10				
5 Use of horn	10				
6 Steering	10				
7 Slow and other warning signs	6				
8 Stop Signs	10				
9 Traffic Lights	10	<u>1</u>	<u>10</u>	<u>leave one car length in front</u>	
10 Intersections and crosswalks	20				
11 Right-of-way	20				
12 Lane observance	20				
13 Change lane	10				
14 Speed controls	20				
15 Following	20				
16 Right turns	10				
17 Left turns	10				
18 Parallel parking	10	<u>1</u>	<u>10</u>	<u>use turn signal when pulling away</u>	
19 Parking on hill	20				
20 Backing	20				
21 Use of brakes	6				
22 Use of mirrors	10				
23 Alertness	20				
24 Familiarity with rules	10				
25 Defensive driving	20				
GRAND TOTAL (125 = Failure)			<u>20</u>	GROUNDS FOR IMMEDIATE REJECTION	

Instructions given: ☒ Pretrip
☒ Parking on hill
☒ Use of seat belt

ACCIDENT ☐ CLEAR VIOLATION ☐DANGEROUS ACTION ☐ LACK OF COOPERATION OR REFUSAL TO PERFORM ☐

Michael R. Farmer
 Examiner's Signature

Jose Andreu
 Applicant's Signature

CERTIFICATION OF ROAD TEST

DRIVER'S NAME Jose Andreu Driver License No. A536-4206-3163 Exp Date 06/08/05Social Security No. 359-80-1956 State IL Type Vehicle P800

This is to certify that the above named driver was given a road test under my supervision on 6/19/03 consisting of 25 miles of driving
45 minutes of driving

It is my considered opinion that this driver possesses sufficient driving skill to operate safely the type of commercial motor vehicle listed above

Examiner's Signature Michael R. Farmer Title ON CAR SupervisorUNITED PARCEL SERVICE 150 S. Lombard Rd. Addison IL, 60101
District Address

552001

UPS 0013



United Parcel Service

DELIVERY VEHICLE ROAD TEST REPORT

Name <u>Jose Andrew</u>		License Exp. Date <u>06/08/97</u>		Type Equipment	Date <u>10/12/96</u>
	Demerit	Demerit Count	Total	Remarks	
1 Starting Engine	6				
2 Starting Vehicle	10				
3 Gear Shifting	10				
4 Clutch	10	1		<u>grind gear. Don't hold clutch.</u>	
5 Use of horn	10				
6 Steering	10				
7 Slow and other warning signs	6				
8 Stop Signs	10				
9 Traffic lights	10				
10 Intersections and crosswalks	20				
11 Right-of-way	20				
12 Lane observance	20	1		<u>don't center car in lane</u>	
13 Change lanes	10				
14 Speed control	20				
15 Following	20				
16 Right turns	10				
17 Left turns	10				
18 Parallel parking	10				
19 Parking on hill	20				
20 Backing	20	1			
21 Use of brakes	6				
22 Use of mirrors	10	1		<u>use mirrors more.</u>	
23 Alertness	20				
24 Familiarity with rules	10				
25 Defensive driving	20				

GRAND TOTAL (125=Failure)

☐ ACCIDENT ☐ CLEAR VIOLATION
☐ DANGEROUS ACTION ☐ LACK OF COOPERATION OR REFUSAL TO PERFORM

Instructions given: ☐ Pre-trip
☐ Mirror/Brake
☐ Parking on hill
☐ Use of seat belt

Examiner's Signature

Applicant's Signature

CERTIFICATION OF ROAD TEST

DRIVER'S NAME Jose Andrew Driver License No. A536-4206-3163 Exp Date 06/08/97
 Social Security No. 359 801956 State IL Type Vehicle _____

This is to certify that the above named driver was given a road test under my supervision on _____/_____/_____ consisting of _____ miles of driving.
 It is my considered opinion that this driver possesses sufficient driving skill to operate safely the type of commercial motor vehicle listed above.

Examiner's Signature

Title

UNITED PARCEL SERVICE

District Address

Personnel - Original Test and Certificate
 Driver - Carbon Certificate
 Carrier Supervisor - Carbon Test

016221 4-82 (10M 1299)

UPS 0014

J.S. Department of Justice
Immigration and Naturalization ServiceOMB 1545-0136
Employment Eligibility Verification

Please read instructions carefully before completing this form. The instructions must be available during completion of this form. ANTI-DISCRIMINATION NOTICE. It is illegal to discriminate against work eligible individuals. Employers NOT specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Verification. To be completed and signed by employee at the time employment begins

Print Name: Last <u>Andrew</u>	First <u>Jose</u>	Middle Initial	Maiden Name
Address (Street Name and Number) <u>7831 W Roscher</u>		City <u>Chicago</u>	State <u>Ill.</u>
Zip Code <u>60656</u>		Date of Birth (month/day/year) <u>06-08-63</u>	Social Security # <u>359 80 1956</u>

I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following):
☒ A citizen or national of the United States
☐ A Lawful Permanent Resident (Alien # A)
☐ An alien authorized to work until _____ (Alien # or Admission #)

Employee's Signature
[Signature]

Date (month/day/year)
09-16-96

Preparer and/or Translator Certification. (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Preparer's/Translator's Signature _____ Print Name _____
 Address (Street Name and Number, City, State, Zip Code) _____ Date (month/day/year) _____

Section 2. Employer Review and Verification. To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C as listed on the reverse of this form and record the title, number and expiration date, if any, of the document(s).

List A	OR	List B	AND	List C
Document title: _____		<u>Drivers License</u>		<u>Social Security Card</u>
Issuing authority: _____		<u>State of Illinois</u>		<u>Department of Health and</u>
Document #: _____		<u>A536 42063163</u>		<u>35980 1956</u>
Expiration Date (if any): <u>1/1</u>		<u>6/8/97</u>		<u>1/1</u>
Document #: _____				<u>Numer Services</u>
Expiration Date (if any): <u>1/1</u>				

CERTIFICATION - I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) 9/18/96 and that to the best of my knowledge the employee is eligible to work in the United States. (State employment agencies may omit the date the employee began employment).

Signature of Employer or Authorized Representative <u>[Signature]</u>	Print Name <u>MARY GRACE GELICK</u>	Title <u>Employment Representative</u>
Business or Organization Name <u>United Parcel Service</u>	Address (Street Name and Number, City, State, Zip Code) <u>150 So. Lombard Rd. Addison, IL 60101</u>	Date (month/day/year) <u>9-16-96</u>

Section 3. Updating and Reverification. To be completed and signed by employer

A. New Name (if applicable)	B. Date of rehire (month/day/year) (if applicable)
C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment eligibility.	
Document Title: _____	Document #: _____
Expiration Date (if any): <u>1/1</u>	

I attest, under penalty of perjury, that to the best of my knowledge, this employee is eligible to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative _____ Date (month/day/year) _____

Form I-9 (Rev. 11-91-01) N

LISTS OF ACCEPTABLE DOCUMENTS

LIST A		LIST B		LIST C
Documents that Establish Both Identity and Employment Eligibility	OR	Documents that Establish Identity	AND	Documents that Establish Employment Eligibility
1. U.S. Passport (unexpired or expired)		1. Driver's license or ID card issued by a state or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address		1. U.S. social security card issued by the Social Security Administration (other than a card stating it is not valid for employment)
2. Certificate of U.S. Citizenship (INS Form N-560 or N-581)		2. ID card issued by federal, state, or local government agencies or entities provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address		2. Certification of Birth Abroad issued by the Department of State (Form FS-545 or Form DS-1350)
3. Certificate of Naturalization (INS Form N-550 or N-570)		3. School ID card with a photograph		3. Original or certified copy of a birth certificate issued by a state, county, municipal authority or outlying possession of the United States bearing an official seal
4. Unexpired foreign passport, with I-551 stamp or attached INS Form I-94 indicating unexpired employment authorization		4. Voter's registration card		4. Native American tribal document
5. Alien Registration Receipt Card with photograph (INS Form I-151 or I-551)		5. U.S. Military card or draft record		5. U.S. Citizen ID Card (INS Form I-197)
6. Unexpired Temporary Resident Card (INS Form I-688)		6. Military dependent's ID card		6. ID Card for use of Resident Citizen in the United States (INS Form I-179)
7. Unexpired Employment Authorization Card (INS Form I-688A)		7. U.S. Coast Guard Merchant Mariner Card		7. Unexpired employment authorization document issued by the INS (other than those listed under List A)
8. Unexpired Reentry Permit (INS Form I-327)		8. Native American tribal document		
9. Unexpired Refugee Travel Document (INS Form I-571)		9. Driver's license issued by a Canadian government authority		
10. Unexpired Employment Authorization Document issued by the INS which contains a photograph (INS Form I-688B)		For persons under age 18 who are unable to present a document listed above:		
		10. School record or report card		
		11. Clinic, doctor, or hospital record		
		12. Day-care or nursery school record		

Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274)

ups

HONESTY IN EMPLOYMENT

As an employee of United Parcel Service, it is essential that you thoroughly understand how highly we regard honesty from all employees, so much so, that honesty is a company policy.

THE UPS POLICY BOOK STATES:

"WE INSIST UPON INTEGRITY IN OUR PEOPLE. We present our company honestly to employees and, in turn, expect them to be honest with us.

"We expect honesty from our people in their handling of money, merchandise, and property with which they are entrusted. We insist on integrity in the preparation and approval of all reports.

"We expect our people to be honest with respect to intangible things as well in the time, effort, and full performance of their jobs; in fair play in dealing with others; and in the acknowledgement of mistakes or other shortcomings.

"The great majority of our people are of high moral character. However, when we do discover a dishonest person in our organization, we deal with that individual quickly and firmly. For our company to be known for its integrity, each one of us must meet high standards."

CONSEQUENCES OF DISHONESTY

DISHONESTY WILL result in immediate dismissal and possible criminal prosecution.

Since many of the packages you will handle move between states, theft of these shipments is a felony violation investigated by the FBI and other law enforcement agencies. If convicted, the maximum penalty for thefts involving interstate commerce is 10 year imprisonment and/or a fine of \$5,000.00.

In addition to theft, there are other types of dishonesty such as: tampering, or the misuse or theft of intellectual properties, privileged information, overgoods, or monies handled by our employees. (NOTE: Any and all money you receive each day, must be properly accounted for and turned in at the end of your work shift that same day.)

EFFECTS OF A FELONY

A felony is a class of crime more severe than a misdemeanor, and is punishable by imprisonment, a fine, or both. A felony conviction results in a permanent mark on a person's record which may never be removed. This record may cause an individual to suffer severe consequences, and may also cause them to be disadvantaged in other subsequent life pursuits.

OTHER INFORMATION

WE EXPECT all employees to report acts of dishonesty. In an effort to prevent thefts, we have instituted a reward of up to \$5,000.00, payable to UPS employees, for information leading to the arrest and conviction of any employee who has stolen merchandise or other valuables from our company.

I have read the above information and I understand the UPS policy that reflects their high regard for honesty. I understand my obligations to maintain personal honesty and prevent the dishonesty of others.

09/16/96
Date

Joe Proctor
Employee's Signature
Mary J. Grich
WITNESSED BY



United Parcel Service

D.O.T. SAFETY REGULATIONS QUESTIONNAIRE

DRIVER Jose AranaDATE 10 110 196SOC. SEC. NO. 352801956**INSTRUCTIONS:**

Each question has four answers but only one is right. Read all the answers for each question and pick the answer you think is correct. Mark an "X" in the box next to the answer you choose. Do not pick more than one answer for each question. Be sure to answer every question and do not skip any pages.

<p>1. A motor carrier who is also a driver (owner-operator):</p> <p>A. <input type="checkbox"/> is not covered by the safety regulations.</p> <p>B. <input type="checkbox"/> must obey only those parts of the regulations which cover drivers.</p> <p>C. <input type="checkbox"/> must obey only those parts of the regulations which cover motor carriers.</p> <p>D. <input checked="" type="checkbox"/> must obey both the parts covering drivers and the parts covering motor carriers.</p>	<p>8. Persons with arthritis, rheumatism, or any such condition which may affect safe driving:</p> <p>A. <input type="checkbox"/> cannot drive unless they are checked by a doctor before each trip.</p> <p>B. <input checked="" type="checkbox"/> cannot drive.</p> <p>C. <input type="checkbox"/> cannot drive except when they are free of pain.</p> <p>D. <input type="checkbox"/> cannot drive unless another driver is along.</p>
<p>2. With only a few exceptions, the Federal Motor Carrier Safety Regulations say a driver must be:</p> <p>A. <input type="checkbox"/> at least 18 years old.</p> <p>B. <input type="checkbox"/> at least 19 years old.</p> <p>C. <input type="checkbox"/> at least 20 years old.</p> <p>D. <input type="checkbox"/> at least 21 years old.</p>	<p>9. Persons who have ever had epilepsy:</p> <p>A. <input type="checkbox"/> cannot drive unless another driver is along.</p> <p>B. <input checked="" type="checkbox"/> cannot drive.</p> <p>C. <input type="checkbox"/> cannot drive on long runs.</p> <p>D. <input type="checkbox"/> cannot drive without monthly medical examinations.</p>
<p>3. A driver cannot drive a motor vehicle:</p> <p>A. <input type="checkbox"/> for one year after a first offense conviction for a felony involving a commercial motor vehicle operated by the driver.</p> <p>B. <input type="checkbox"/> for one year after a first offense conviction for driving a commercial vehicle under the influence of alcohol or narcotics.</p> <p>C. <input type="checkbox"/> for one year after a first offense conviction for leaving the scene of an accident which resulted in personal injury or death.</p> <p>D. <input checked="" type="checkbox"/> for one year after a first offense conviction for any of the above.</p>	<p>10. In order to be able to drive, a driver:</p> <p>A. <input type="checkbox"/> must not have any mental, nervous or physical problem likely to affect safe driving.</p> <p>B. <input type="checkbox"/> must not use an amphetamine, narcotic or any habit-forming drug.</p> <p>C. <input type="checkbox"/> must not have a current alcoholism problem.</p> <p>D. <input checked="" type="checkbox"/> must not have or use any of the above.</p>
<p>4. Every driver applicant must fill out an application form giving:</p> <p>A. <input type="checkbox"/> a list of all vehicle accidents during the previous 3 years.</p> <p>B. <input type="checkbox"/> a list of all motor vehicle violation convictions and bond forfeits (except for parking) during the previous 3 years.</p> <p>C. <input type="checkbox"/> a list of names and addresses of all employers during the previous 3 years.</p> <p>D. <input checked="" type="checkbox"/> all of the above.</p>	<p>11. If a driver gets an injury or illness serious enough to affect the ability to perform duties, the driver:</p> <p>A. <input type="checkbox"/> must report it at the next scheduled physical.</p> <p>B. <input type="checkbox"/> cannot drive again.</p> <p>C. <input checked="" type="checkbox"/> must take another physical and be recertified before driving again.</p> <p>D. <input type="checkbox"/> must wait at least 1 month after recovery before driving again.</p>
<p>5. At least once a year, a driver must fill out a form listing all motor vehicle violations (except parking) occurring during the previous 12 months. The driver must fill out the form:</p> <p>A. <input checked="" type="checkbox"/> even if there were no violations.</p> <p>B. <input type="checkbox"/> only if convicted.</p> <p>C. <input type="checkbox"/> only if convicted or had forfeited bond or collateral.</p> <p>D. <input type="checkbox"/> only if the carrier requires it.</p>	<p>12. A driver may not drive faster than posted speed limits:</p> <p>A. <input type="checkbox"/> unless the driver is sick and must complete the run quickly.</p> <p>B. <input checked="" type="checkbox"/> at any time.</p> <p>C. <input type="checkbox"/> unless the driver is passing another vehicle.</p> <p>D. <input type="checkbox"/> unless the driver is late and must make a scheduled arrival.</p>
<p>6. If a driver applicant has a valid certificate showing successful completion of a driver's road test:</p> <p>A. <input type="checkbox"/> the carrier must accept it.</p> <p>B. <input checked="" type="checkbox"/> the carrier may still require the applicant to take a road test.</p> <p>C. <input type="checkbox"/> the carrier cannot accept it.</p> <p>D. <input type="checkbox"/> the carrier may request a road test waiver from the Bureau of Motor Carrier Safety.</p>	<p>13. When a driver's physical condition while on a trip requires the driver to stop driving, but stopping would not be safe, the driver:</p> <p>A. <input type="checkbox"/> must stop anyway.</p> <p>B. <input type="checkbox"/> may try to complete the trip, but as quickly as possible.</p> <p>C. <input type="checkbox"/> may continue to drive to the home terminal.</p> <p>D. <input checked="" type="checkbox"/> may continue to drive, but must stop at the nearest safe place.</p>
<p>7. Persons with breathing problems which may affect safe driving:</p> <p>A. <input checked="" type="checkbox"/> cannot drive.</p> <p>B. <input type="checkbox"/> cannot drive unless the vehicle has an emergency oxygen supply.</p> <p>C. <input type="checkbox"/> cannot drive unless another driver is along.</p> <p>D. <input type="checkbox"/> cannot drive except on short runs.</p>	<p>14. A driver may not drink or be under the influence of any alcoholic beverage (regardless of alcoholic content):</p> <p>A. <input checked="" type="checkbox"/> within 4 hours before going on duty or driving.</p> <p>B. <input type="checkbox"/> within 6 hours before going on duty or driving.</p> <p>C. <input type="checkbox"/> within 8 hours before going on duty or driving.</p> <p>D. <input type="checkbox"/> within 12 hours before going on duty or driving.</p>
<p>15. A driver must be satisfied that service and parking brakes, tires, lights and reflectors, mirrors, coupling and other devices are in good working order:</p> <p>A. <input type="checkbox"/> at the end of each trip.</p> <p>B. <input checked="" type="checkbox"/> before the vehicle may be driven.</p> <p>C. <input type="checkbox"/> only when the driver considers it necessary.</p> <p>D. <input type="checkbox"/> according to schedules set by the carrier.</p>	

<p>16. The following must be in place and ready for use before a vehicle can be driven:</p> <p>A. <input type="checkbox"/> at least one spare fuse or other overload protector of each type used on the vehicle.</p> <p>B. <input checked="" type="checkbox"/> a tool kit containing a specified list of hand tools.</p> <p>C. <input type="checkbox"/> at least one spare tire for every four wheels.</p> <p>D. <input type="checkbox"/> a set of spark plugs.</p>	<p>25. When a motor vehicle cannot be stopped off the traveled part of the highway, the driver:</p> <p>A. <input type="checkbox"/> must keep driving.</p> <p>B. <input type="checkbox"/> may stop, but shall get as far off the traveled part of the highway as possible.</p> <p>C. <input type="checkbox"/> may stop, but shall make sure that the vehicle can be seen as far as possible to its front and rear.</p> <p>D. <input checked="" type="checkbox"/> may stop if the driver has to, but should do both B and C above.</p>
<p>17. If any part of the cargo or anything else blocks a driver's front or side views, arm or leg movements, or the driver's access to emergency equipment, the driver:</p> <p>A. <input type="checkbox"/> can drive the vehicle, but must report the problems at the end of the trip.</p> <p>B. <input checked="" type="checkbox"/> cannot drive the vehicle.</p> <p>C. <input type="checkbox"/> can drive the vehicle, but only at speeds under 40 miles per hour.</p> <p>D. <input type="checkbox"/> can drive the vehicle, but only on secondary roads.</p>	<p>26. If a vehicle has a breakdown the driver must place one emergency signal:</p> <p>A. <input type="checkbox"/> 100 feet in front of the vehicle in the center of the lane it occupies.</p> <p>B. <input type="checkbox"/> 100 feet in back of the vehicle in the center of the lane it occupies.</p> <p>C. <input type="checkbox"/> 10 feet in front or back of the traffic side.</p> <p>D. <input checked="" type="checkbox"/> at all of the above locations.</p>
<p>18. Any driver who needs glasses to meet the minimum visual requirements:</p> <p>A. <input type="checkbox"/> must drive only during daylight hours.</p> <p>B. <input checked="" type="checkbox"/> must always wear glasses when driving.</p> <p>C. <input type="checkbox"/> must always carry a spare pair of glasses.</p> <p>D. <input type="checkbox"/> must not drive a motor vehicle.</p>	<p>27. If a vehicle has a breakdown on a poorly-lit street or highway, the driver shall place on the traffic side:</p> <p>A. <input type="checkbox"/> a reflective triangle.</p> <p>B. <input type="checkbox"/> a lighted red electric lantern.</p> <p>C. <input type="checkbox"/> a red reflector.</p> <p>D. <input checked="" type="checkbox"/> any one of the above.</p>
<p>19. A driver may drive with a hearing aid:</p> <p>A. <input type="checkbox"/> if the driver always has it turned on while driving.</p> <p>B. <input type="checkbox"/> if the driver always carries a spare power source for it.</p> <p>C. <input type="checkbox"/> if the driver can meet the hearing requirements when the hearing aid is turned on.</p> <p>D. <input checked="" type="checkbox"/> if all of the above requirements are met.</p>	<p>28. No emergency signals are required for a vehicle with a breakdown if the street or highway lighting is bright enough so it can be seen at a distance of:</p> <p>A. <input type="checkbox"/> 100 feet.</p> <p>B. <input type="checkbox"/> 200 feet.</p> <p>C. <input checked="" type="checkbox"/> 500 feet.</p> <p>D. <input type="checkbox"/> 750 feet.</p>
<p>20. A driver required to stop at a railroad crossing should bring the vehicle to a stop no closer to the tracks than:</p> <p>A. <input type="checkbox"/> 5 feet.</p> <p>B. <input type="checkbox"/> 10 feet.</p> <p>C. <input checked="" type="checkbox"/> 15 feet.</p> <p>D. <input type="checkbox"/> 20 feet.</p>	<p>29. If a vehicle has a breakdown and stops on a poorly-lit divided or one way highway the driver must place one emergency signal:</p> <p>A. <input type="checkbox"/> 200 feet in back of the vehicle in the center of the lane it occupies.</p> <p>B. <input type="checkbox"/> 100 feet in back of the vehicle in the on the traffic side of the vehicle.</p> <p>C. <input type="checkbox"/> 10 feet in back of the vehicle on the traffic side of the vehicle.</p> <p>D. <input checked="" type="checkbox"/> at all of the above locations.</p>
<p>21. Shifting gears is not permitted:</p> <p>A. <input type="checkbox"/> when traveling faster than 35 miles per hour.</p> <p>B. <input type="checkbox"/> when moving across any bridge.</p> <p>C. <input checked="" type="checkbox"/> when crossing railroad tracks.</p> <p>D. <input type="checkbox"/> when traveling down a hill steeper than 10 degrees.</p>	<p>30. Lighted flame-producing emergency signals, including fuseses:</p> <p>A. <input type="checkbox"/> may not be used with vehicles carrying Class A or B explosives.</p> <p>B. <input type="checkbox"/> may not be used with tank vehicles, loaded or empty, which are used to carry flammable liquids or gas.</p> <p>C. <input type="checkbox"/> may not be used with any vehicle using compressed gas as a fuel.</p> <p>D. <input checked="" type="checkbox"/> may not be used with any of the above.</p>
<p>22. A driver of a motor vehicle, not required to stop at drawbridges without signals, must:</p> <p>A. <input checked="" type="checkbox"/> drive at a rate of speed which will permit a stop before reaching the lip of the draw.</p> <p>B. <input type="checkbox"/> sound the horn before crossing.</p> <p>C. <input type="checkbox"/> proceed across without reducing speed.</p> <p>D. <input type="checkbox"/> slow down only if directed by an attendant.</p>	<p>31. A driver is required to turn on vehicle lights:</p> <p>A. <input type="checkbox"/> from one-half hour before sunset to one-half hour before sunrise.</p> <p>B. <input type="checkbox"/> from one-half hour before sunset to sunrise.</p> <p>C. <input checked="" type="checkbox"/> from one-half hour after sunset to one-half hour before sunrise.</p> <p>D. <input type="checkbox"/> from sunset to one-half hour before sunrise.</p>
<p>23. When turning a vehicle a driver should begin flashing the turn signal:</p> <p>A. <input type="checkbox"/> at least 50 feet before turning.</p> <p>B. <input type="checkbox"/> at least 60 feet before turning.</p> <p>C. <input type="checkbox"/> at least 75 feet before turning.</p> <p>D. <input checked="" type="checkbox"/> at least 100 feet before turning.</p>	<p>32. When lights are required on the open highway, a driver shall use the high beam:</p> <p>A. <input checked="" type="checkbox"/> except when within 500 feet of an on-coming vehicle or a vehicle the driver is following.</p> <p>B. <input type="checkbox"/> except when within 400 feet of an on-coming vehicle or a vehicle the driver is following.</p> <p>C. <input type="checkbox"/> except when within 200 feet of an on-coming vehicle or a vehicle the driver is following.</p> <p>D. <input type="checkbox"/> except when within 100 feet of an on-coming vehicle or a vehicle the driver is following.</p>
<p>24. Which of the following is true?</p> <p>A. <input checked="" type="checkbox"/> if a seat belt is installed in the vehicle, a driver must have it fastened before beginning to drive.</p> <p>B. <input type="checkbox"/> a driver may or may not use the seat belt, depending on the driver's judgment.</p> <p>C. <input type="checkbox"/> seat belts are not necessary on heavier vehicles.</p> <p>D. <input type="checkbox"/> a driver must use the seat belt only if required to by the carrier.</p>	

<p>33. When lights are required a driver may use lower beam lights:</p> <p>A. <input checked="" type="checkbox"/> when fog, dust or other such conditions exists.</p> <p>B. <input type="checkbox"/> when approaching tunnels or bridges.</p> <p>C. <input type="checkbox"/> when driving on one way highways.</p> <p>D. <input type="checkbox"/> when within 1,000 feet of business areas or where people live.</p>	<p>42. Minimum requirements for lighting, reflecting and electrical equipment and devices on buses and trucks:</p> <p>A. <input type="checkbox"/> are set by the vehicle makers.</p> <p>B. <input type="checkbox"/> are set by the National Safety Council.</p> <p>C. <input checked="" type="checkbox"/> are specified in the safety regulations.</p> <p>D. <input type="checkbox"/> are set by the trucking associations.</p>
<p>34. Every driver involved in an accident must follow the safety regulation procedures whenever an injury or death is involved or if:</p> <p>A. <input type="checkbox"/> the accident is caused by the driver and property damage of over \$2,000 results.</p> <p>B. <input type="checkbox"/> property damage of over \$2,000.00 results, no matter who is at fault.</p> <p>C. <input type="checkbox"/> property damage of over \$100.00 results.</p> <p>D. <input checked="" type="checkbox"/> property damage of any kind results.</p>	<p>43. Every motor vehicle which has a load sticking out over its sides must be specifically marked with flags and lamps. Additional flags and lamps must be added if the load or tailgate sticks out beyond the rear of the vehicle by more than:</p> <p>A. <input type="checkbox"/> 2 feet.</p> <p>B. <input checked="" type="checkbox"/> 4 feet.</p> <p>C. <input type="checkbox"/> 6 feet.</p> <p>D. <input type="checkbox"/> 8 feet.</p>
<p>35. If a driver strikes a parked vehicle, the driver should first:</p> <p>A. <input type="checkbox"/> stop and call the local police.</p> <p>B. <input type="checkbox"/> stop and call the carrier.</p> <p>C. <input checked="" type="checkbox"/> stop and try to find the driver or owner of the parked vehicle.</p> <p>D. <input type="checkbox"/> stop and estimate the damage.</p>	<p>44. Every vehicle shall have a parking brake system which will hold it, no matter what its load:</p> <p>A. <input checked="" type="checkbox"/> on any grade on which it is operated which is free from ice and snow.</p> <p>B. <input type="checkbox"/> on all grades under 15 degrees which are free from ice and snow.</p> <p>C. <input type="checkbox"/> on all grades under 20 degrees which are free from ice and snow.</p> <p>D. <input type="checkbox"/> on all grades under 25 degrees which are free from ice and snow.</p>
<p>36. When a driver receives notice of license or permit revocation, suspension, or other withdrawal action, the driver must:</p> <p>A. <input type="checkbox"/> notify the carrier within 72 hours.</p> <p>B. <input type="checkbox"/> notify the carrier within one week.</p> <p>C. <input checked="" type="checkbox"/> notify the carrier before the end of the next business day.</p> <p>D. <input type="checkbox"/> take no action since the carrier will get a notice.</p>	<p>45. A portable heater may not be used in any vehicle cab:</p> <p>A. <input type="checkbox"/> unless the heater is secured.</p> <p>B. <input type="checkbox"/> unless the heater is of the electric filament type.</p> <p>C. <input checked="" type="checkbox"/> at any time.</p> <p>D. <input type="checkbox"/> without approval from the carrier.</p>
<p>37. Except in emergencies, no driver shall allow a vehicle to be driven by any other person:</p> <p>A. <input type="checkbox"/> except by those the driver knows are capable.</p> <p>B. <input type="checkbox"/> except on roads with little or no traffic.</p> <p>C. <input checked="" type="checkbox"/> except by those allowed by the carrier to do it.</p> <p>D. <input type="checkbox"/> unless the driver goes along with the person driving.</p>	<p>46. A driver is not generally allowed to drive for more than:</p> <p>A. <input type="checkbox"/> 6 hours following 8 straight hours off duty.</p> <p>B. <input type="checkbox"/> 8 hours following 8 straight hours off duty.</p> <p>C. <input checked="" type="checkbox"/> 10 hours following 8 straight hours off duty.</p> <p>D. <input type="checkbox"/> 12 hours following 8 straight hours off duty.</p>
<p>38. A person may ride inside a vehicle's closed body or trailer:</p> <p>A. <input type="checkbox"/> only on short runs.</p> <p>B. <input checked="" type="checkbox"/> only if there is an easy way to get out from the inside.</p> <p>C. <input type="checkbox"/> only if the inside of the body or trailer is lighted.</p> <p>D. <input type="checkbox"/> only if there is no cargo in it.</p>	<p>47. Most drivers of large vehicles are not allowed to drive:</p> <p>A. <input type="checkbox"/> after they have been on duty for 16 hours.</p> <p>B. <input checked="" type="checkbox"/> after they have been on duty for 15 hours.</p> <p>C. <input type="checkbox"/> after they have been on duty for 14 hours.</p> <p>D. <input type="checkbox"/> after they have been on duty for 12 hours.</p>
<p>39. If carbon-monoxide is inside a vehicle or if a mechanical problem may produce a carbon-monoxide danger, the vehicle:</p> <p>A. <input type="checkbox"/> may be sent out and driven so long as the windows are left open.</p> <p>B. <input checked="" type="checkbox"/> may not be sent out or driven.</p> <p>C. <input type="checkbox"/> may be sent out and driven only if the carrier decides the vehicle has to be used.</p> <p>D. <input type="checkbox"/> may be sent out and driven on short runs.</p>	<p>48. Generally, a driver may not drive after being on duty more than:</p> <p>A. <input type="checkbox"/> 40 hours in any 7 straight days.</p> <p>B. <input type="checkbox"/> 50 hours in any 7 straight days.</p> <p>C. <input checked="" type="checkbox"/> 60 hours in any 7 straight days.</p> <p>D. <input type="checkbox"/> 70 hours in any 7 straight days.</p>
<p>40. No motor vehicle shall be operated out of gear:</p> <p>A. <input type="checkbox"/> except when fuel must be saved.</p> <p>B. <input type="checkbox"/> except on hills which are less than 20 degrees.</p> <p>C. <input checked="" type="checkbox"/> except when it is necessary for stopping or shifting gears.</p> <p>D. <input type="checkbox"/> except when the vehicle's speed is under 25 miles per hour.</p>	<p>49. When a driver is riding in a vehicle, but is not driving and has no other responsibility, such time shall be counted as:</p> <p>A. <input type="checkbox"/> on-duty time.</p> <p>B. <input checked="" type="checkbox"/> on-duty time unless the driver is allowed 8 straight hours off duty upon arrival at the destination.</p> <p>C. <input type="checkbox"/> on-duty time unless the driver is allowed 6 straight hours off duty upon arrival at the destination.</p> <p>D. <input type="checkbox"/> on-duty time unless the driver is allowed 4 straight hours off duty upon arrival at the destination.</p>
<p>41. Under the Federal Motor Carrier Safety Regulations, no vehicle may be driven:</p> <p>A. <input type="checkbox"/> until a list of all missing or defective equipment has been prepared and given to the carrier.</p> <p>B. <input type="checkbox"/> until all equipment has been inspected and replacements for defective parts have been ordered.</p> <p>C. <input type="checkbox"/> unless all missing equipment is to be replaced no later than the end of the vehicle's next run.</p> <p>D. <input checked="" type="checkbox"/> until it meets all of the equipment requirements of the regulations.</p>	<p>50. Every driver must prepare an original and one copy of the driver's record of duty status which must be kept current by updating it:</p> <p>A. <input checked="" type="checkbox"/> every time a change of duty status is made.</p> <p>B. <input type="checkbox"/> every 24 hours.</p> <p>C. <input type="checkbox"/> every 8 hours.</p> <p>D. <input type="checkbox"/> at the end of each trip.</p> <p>On-duty time is defined as:</p> <p>A. <input type="checkbox"/> All time from the time you start work until you are relieved from responsibility of performing work;</p> <p>B. <input type="checkbox"/> Performing any work in the employ of any motor carrier;</p> <p>C. <input type="checkbox"/> Performing any compensated work for any employer;</p> <p>D. <input type="checkbox"/> All of the above.</p>

<p>51. Except for the name and main address of the carrier, all entries relating to the driver's record of duty status:</p> <p>A. <input type="checkbox"/> must be printed in ink or typed.</p> <p>B. <input type="checkbox"/> must be made by the carrier dispatcher.</p> <p>C. <input type="checkbox"/> must be made in front of a witness.</p> <p>D. <input checked="" type="checkbox"/> must be in the driver's handwriting.</p>	<p>59. A vehicle which contains hazardous materials <u>other than</u> Class A or B explosives must be attended at all times:</p> <p>A. <input type="checkbox"/> by the driver.</p> <p>B. <input checked="" type="checkbox"/> by the driver except when involved in other driver duties.</p> <p>C. <input type="checkbox"/> by the driver or a person chosen by the driver.</p> <p>D. <input type="checkbox"/> by the driver or a police officer.</p>
<p>52. Which of the following is not required to be put in a driver's record of duty status?</p> <p>A. <input type="checkbox"/> total miles driving today.</p> <p>B. <input type="checkbox"/> total hours in each duty status.</p> <p>C. <input type="checkbox"/> origin and destination.</p> <p>D. <input checked="" type="checkbox"/> month, day and year.</p>	<p>60. A vehicle containing Class A or B explosives or other hazardous materials on a trip is "attended":</p> <p>A. <input type="checkbox"/> when the person in charge is anywhere within 100 feet of the vehicle.</p> <p>B. <input type="checkbox"/> as long as the driver can see the vehicle from 200 feet away.</p> <p>C. <input checked="" type="checkbox"/> when the person in charge is within 100 feet and has a clear view of the vehicle.</p> <p>D. <input type="checkbox"/> when the person in charge is resting in the berth.</p>
<p>53. If an emergency delays a run which could normally have been completed within hours of service limits, the driver:</p> <p>A. <input type="checkbox"/> must still stop driving when the hours of service limits is reached.</p> <p>B. <input type="checkbox"/> may drive for 1 extra hour.</p> <p>C. <input type="checkbox"/> may drive for 2 extra hours.</p> <p>D. <input checked="" type="checkbox"/> may finish the run without being in violation.</p>	<p>61. Except for short periods when operations make it necessary, trucks carrying Class A or B explosives cannot be parked any closer to bridges, tunnels, buildings or crowds of people than:</p> <p>A. <input type="checkbox"/> 50 feet.</p> <p>B. <input type="checkbox"/> 100 feet.</p> <p>C. <input type="checkbox"/> 200 feet.</p> <p>D. <input checked="" type="checkbox"/> 300 feet.</p>
<p>54. A driver declared "Out of Service":</p> <p>A. <input type="checkbox"/> must take a road test before driving again.</p> <p>B. <input type="checkbox"/> must wait 72 hours before driving again.</p> <p>C. <input type="checkbox"/> must appeal to the Director of the Bureau of Motor Carrier Safety to drive again.</p> <p>D. <input checked="" type="checkbox"/> can drive again only after hours of service requirements are met.</p>	<p>62. Smoking or carrying a lighted cigarette, cigar or pipe near a vehicle which contains explosives, oxidizing or flammable materials is not allowed:</p> <p>A. <input type="checkbox"/> except in the closed cab of the vehicle.</p> <p>B. <input type="checkbox"/> except when the vehicle is moving.</p> <p>C. <input checked="" type="checkbox"/> except at a distance of 25 feet or more from the vehicle.</p> <p>D. <input type="checkbox"/> except when approved by the carrier.</p>
<p>55. If a vehicle on a trip is in a condition likely to cause an accident or breakdown:</p> <p>A. <input type="checkbox"/> the driver should report it at the end of the run so repairs can be made.</p> <p>B. <input type="checkbox"/> the driver should drive at lower speeds for the rest of the run.</p> <p>C. <input checked="" type="checkbox"/> the driver should stop immediately unless going on to the nearest repair shop is safer than stopping.</p> <p>D. <input type="checkbox"/> the driver should change the route so as to get away from heavily traveled roads.</p>	<p>63. When a vehicle containing hazardous material is being fueled:</p> <p>A. <input type="checkbox"/> no person may remain in the cab.</p> <p>B. <input checked="" type="checkbox"/> a person must be in control of the fueling process at the point where the fuel tank is filled.</p> <p>C. <input type="checkbox"/> the area within 50 feet of the vehicle must be cleared.</p> <p>D. <input type="checkbox"/> the person who controls the fueling process must wear special clothes.</p>
<p>56. If authorized Federal inspectors find a vehicle which is likely to cause an accident or breakdown:</p> <p>A. <input type="checkbox"/> it will be reported to the carrier for repair as soon as the vehicle is not scheduled.</p> <p>B. <input type="checkbox"/> it will be reported to the carrier for repair at the end of the trip.</p> <p>C. <input checked="" type="checkbox"/> it will be marked with an "Out of Service Vehicle" sticker and not driven until repairs are made.</p> <p>D. <input type="checkbox"/> the driver will be held responsible and declared "Out of Service."</p>	<p>64. If a vehicle carrying hazardous materials is equipped with dual tires on any axle, the driver must examine the tires:</p> <p>A. <input type="checkbox"/> at all fueling stops only.</p> <p>B. <input type="checkbox"/> only at the end of each day or tour of duty.</p> <p>C. <input checked="" type="checkbox"/> at the beginning of each trip and each time the vehicle is parked.</p> <p>D. <input type="checkbox"/> at the beginning of each trip only.</p>
<p>57. If the driver personally makes repairs on an "Out of Service" vehicle:</p> <p>A. <input type="checkbox"/> the work must be approved by a mechanic.</p> <p>B. <input checked="" type="checkbox"/> the driver must complete and sign a "Certification of Repairman" form.</p> <p>C. <input type="checkbox"/> the work must be approved by a supervisor.</p> <p>D. <input type="checkbox"/> the work must be approved by a Federal Inspector.</p>	<p>65. If a driver of a vehicle carrying hazardous materials finds a tire which is overheated, the driver must:</p> <p>A. <input type="checkbox"/> wait for the overheated tire to cool before going on.</p> <p>B. <input type="checkbox"/> remove and replace the overheated tire, store it on the vehicle and drive on.</p> <p>C. <input checked="" type="checkbox"/> remove the tire, place it a safe distance from the vehicle and not drive the vehicle until the cause of the overheating is fixed.</p> <p>D. <input type="checkbox"/> drive slowly to the nearest repair shop and have the cause of the overheating fixed.</p>
<p>58. Department of Transportation regulations covering the driving and parking of vehicles containing hazardous materials:</p> <p>A. <input type="checkbox"/> replace State and local laws.</p> <p>B. <input type="checkbox"/> prevent States and cities from having their own laws.</p> <p>C. <input checked="" type="checkbox"/> must be obeyed even if State or local laws are less strict or disagree.</p> <p>D. <input type="checkbox"/> should not be obeyed if State or local laws disagree.</p>	<p>66. When required, specified hazardous materials markings or signs must be placed:</p> <p>A. <input type="checkbox"/> wherever they can be seen clearly.</p> <p>B. <input type="checkbox"/> on the sides and rear of the vehicle.</p> <p>C. <input checked="" type="checkbox"/> on the front, rear and sides of the vehicle.</p> <p>D. <input type="checkbox"/> on the front and rear bumpers of the vehicle.</p>

Examiner is to review each incorrect answer with the examinee giving him/her the correct answer. Examinee must then initial that question to indicate that review and understanding of the material.

EXAMINER _____

TOTAL CORRECT _____



United Parcel Service

CERTIFICATION OF WRITTEN EXAMINATION

This is to certify that the person whose signature appears below, has successfully completed the written examination under my supervision in accordance with the provisions of Sec. 391.35 of the Motor Carrier Safety Regulations.

Lois Anderson
(Signature of person taking examination)

02/10/96
(Date of examination)

(Location of examination)

(Signature of examiner)

(Title)

UNITED PARCEL SERVICE -

(District Address)

CERTIFICATION OF WRITTEN EXAMINATION

This is to certify that the person whose signature appears below, has successfully completed the written examination under my supervision in accordance with the provisions of Sec. 391.35 of the Motor Carrier Safety Regulations.

Lois Anderson
(Signature of person taking examination)

06/08/63
(Date of examination)

(Signature of examiner)

(Title)

016249 9-71 (2,100 Pads 12-67)

UPS 0022

Page 1

0246_0113260.TXT

01/04/2005

RPT#: 2973

D. A. C. SERVICES MVR REPORT

STATE: ILLINOIS

D R I V E R I N F O R M A T I O N

ANDREU, JOSE
7831 W RASCHER

REF: 0246

CHICAGO 60656 COUNTY:016

ID: 0113260

LICENSE: A53642063163

GROUP: JAN2005ANNUALREVIEW

DOB:06/08/63 SOC/SEC:

SEX:M HGT:5'05" WT:160 EYES:BRWN HAIR:BLCK

D R I V E R L I C E N S E I N F O R M A T I O N

CLASS	ISSUED	EXPIRES	STATUS	RESTRICTIONS
1-B	05/30/01	06/08/05	NO STOPS IN EFFECT	

M I S C E L L A N E O U S / S T A T E S P E C I F I C I N F O R M A T I O N

CLASS: CDL-B=VEH>26,000 GVWR W/NO TOWED UNIT<10,001 GVWR

LICHTYP: 1=DRIVERS LICENSE

ENDOR: H, P

STATUS: NO STOPS IN EFFECT

ENDOR: H=HAZMAT, P=PASSENGER

MISC: CONTINUOUS LICENSE DATE 08/21/89

D R I V I N G R E C O R D I N F O R M A T I O N

TYPE	V/S-DATE	C/R-DATE	DESCRIPTION	V/C-CODE	PTS
MVR RECORD CLEAR					

DAC RPT#:4-

DAC ACCT#:18651-046 DAC REF#:J6V046PYN2X0NONE 003

DMV DATE:01/04/05 DMV ACCT#:

V/S-DATE=Violation/Suspension Date C/R-DATE=Conviction/Reinstatement Date

□

Page 1

0246_359801956.TXT

01/12/2004

RPT#: 1539

=====

D. A. C. S E R V I C E S M V R R E P O R T

STATE: ILLINOIS

=====

D R I V E R I N F O R M A T I O N

ANDREU, JOSE

REF: 0246

7931 W RASCHER

CHICAGO 60656 COUNTY:016

ID: 359801956

LICENSE: A53642063163

GROUP: UPS JAN 2004

DOB:06/08/63 SOC/SEC:

SEX:M HGT:5'05" WT:160 EYES:BRWN HAIR:BLCK

=====

D R I V E R L I C E N S E I N F O R M A T I O N

CLASS

ISSUED

EXPIRES

STATUS

RESTRICTIONS

1-B

05/30/01 06/08/05

=====

M I S C E L L A N E O U S / S T A T E S P E C I F I C I N F O R M A T I O N

CLASS: CDL-B=VEH>26,000 GVWR W/WO TOWED UNIT<10,001 GVWR

LICHTYP: 1=DRIVERS LICENSE

ENDOR : H, P

ENDOR: H=HAZMAT, P=PASSENGER

MISC: CONTINUOUS LICENSE DATE 08/21/89

=====

D R I V I N G R E C O R D I N F O R M A T I O N

TYPE V/S-DATE C/R-DATE

DESCRIPTION

V/C-CODE

PTS

MVR RECORD CLEAR

DAC RPT#:12-

DAC ACCT#:18651-046 DAC REF#:J6V046NWAK95NONE 009

DMV DATE:01/12/04 DMV ACCT#:

V/S-DATE=Violation/Suspension Date C/R-DATE=Conviction/Reinstatement Date

□

Page 1

01/31/2002

RPT#: 3444

=====

D. A. C. S E R V I C E S M V R R E P O R T

STATE: ILLINOIS

D R I V E R I N F O R M A T I O N

ANDREU, JOSE

REF: 0246

7831 W RASCHER

CHICAGO 60656 COUNTY:016

ID: 359801956

LICENSE: A53642063163

GROUP:

DOB:06/08/63 SOC/SEC:

SEX:M HGT:5'05" WT:160 EYES:BRWN HAIR:BLCK

D R I V E R L I C E N S E I N F O R M A T I O N

CLASS

ISSUED

EXPIRES

STATUS

RESTRICTIONS

1-B

05/30/01 06/08/05

M I S C E L L A N E O U S / S T A T E S P E C I F I C I N F O R M A T I O N

CLASS: CDL-B=VEH>26,000 GVWR W/NO TOWED UNIT<10,001 GVWR

LICHTYP: 1=DRIVERS LICENSE

ENDOR : H, P

ENDOR: H=HAZMAT, P=PASSENGER

MISC: CONTINUOUS LICENSE DATE 08/21/89

D R I V I N G R E C O R D I N F O R M A T I O N

TYPE V/S-DATE

C/R-DATE

DESCRIPTION

V/C-CODE

PTS

ACCI

01/29/99

ACCIDENT (PROPERTY DAMAGE)

REASON CODES:00004

ACCIDENT#:9040941

DAC RPT#:24-

DAC ACCT#:18651-046 DAC REF#:J6V046LQ242VNONE

023

DMV DATE:01/24/02 DMV ACCT#:50200

V/S-DATE=Violation/Suspension Date

C/R-DATE=Conviction/Reinstatement Date

0246_359801956.TXT

Page 1

01/29/2003

RPT#: 39344

D. A. C. S E R V I C E S M V R R E P O R T

STATE: ILLINOIS

D R I V E R I N F O R M A T I O N

ANDREU, JOSE

REF: 0246

7831 W RASCHER

CHICAGO 60656 COUNTY:016

ID: 359801956

LICENSE: A53642063163

GROUP: JAN202003

DOB:06/08/63 SOC/SEC:

SEX:M HGT:5'05" WT:160 EYES:BRWN HAIR:BLCK

D R I V E R L I C E N S E I N F O R M A T I O N

CLASS

ISSUED

EXPIRES

STATUS

RESTRICTIONS

1-B

05/30/01 06/08/05

M I S C E L L A N E O U S / S T A T E S P E C I F I C I N F O R M A T I O N

CLASS: CDL-B=VEH>26,000 GVWR W/WO TOWED UNIT<10,001 GVWR

LIC TYP: 1=DRIVERS LICENSE

ENDOR: H, P

ENDOR: H=HAZMAT, P=PASSENGER

MISC: CONTINUOUS LICENSE DATE 08/21/89

D R I V I N G R E C O R D I N F O R M A T I O N

TYPE V/S-DATE C/R-DATE

DESCRIPTION

V/C-CODE

PTS

ACCI

01/29/99

ACCIDENT (PROPERTY DAMAGE)

REASON CODES:00004

ACCIDENT#:9040941

DAC RPT#:22-

DAC ACCT#:18651-046 DAC REF#:J6V046MTNMMHANONE 021

DMV DATE:01/22/03 DMV ACCT#:50409

V/S-DATE=Violation/Suspension Date

C/R-DATE=Conviction/Reinstatement Date

□

Page 1

01/31/2002

RPT#: 3444

=====

D. A. C. SERVICES MVR REPORT

STATE: ILLINOIS

D R I V E R I N F O R M A T I O N

ANDREU, JOSE

REF: 0246

7831 W RASCHER

CHICAGO 60656 COUNTY:016

ID: 359801956

LICENSE: A53642063163

GROUP:

DOB:06/08/63 SOC/SEC:

SEX:M HGT:5'05" WT:160 EYES:BRWN HAIR:BLCK

D R I V E R L I C E N S E I N F O R M A T I O N

CLASS

ISSUED

EXPIRES

STATUS

RESTRICTIONS

1-B

05/30/01 06/08/05

M I S C E L L A N E O U S / S T A T E S P E C I F I C I N F O R M A T I O N

CLASS: CDL-B=VEH>26,000 GVWR W/WO TOWED UNIT<10,001 GVWR

LICHTYP: 1=DRIVERS LICENSE

ENDOR : H, P

ENDOR: H=HAZMAT, P=PASSENGER

MISC: CONTINUOUS LICENSE DATE 08/21/89

D R I V I N G R E C O R D I N F O R M A T I O N

=====

TYPE V/S-DATE C/R-DATE DESCRIPTION

V/C-CODE

PTS

ACCI

01/29/99

ACCIDENT (PROPERTY DAMAGE)

REASON CODES:00004

ACCIDENT#:9040941

DAC RPT#:24-

DAC ACCT#:18651-046 DAC REF#:J6V046LQ242VNONE 023

DMV DATE:01/24/02 DMV ACCT#:50200

=====

V/S-DATE=Violation/Suspension Date

C/R-DATE=Conviction/Reinstatement Date

UPS 0027

Page 1

01/11/2001

RPT#: 63970

=====

D. A. C. S E R V I C E S M V R R E P O R T

STATE: ILLINOIS

=====

D R I V E R I N F O R M A T I O N

ANDREU, JOSE

REF: 0246

7831 W RASCHER

CHICAGO 60656 COUNTY:016

ID: 359801956

LICENSE: A53642063163

GROUP:

DOB:06/08/63 SOC/SEC:

SEX:M HGT:5'05" WT:160 EYES:BRWN HAIR:BLCK

=====

D R I V E R L I C E N S E I N F O R M A T I O N

CLASS

ISSUED

EXPIRES

STATUS

RESTRICTIONS

1-B

06/02/97 06/08/01

=====

M I S C E L L A N E O U S / S T A T E S P E C I F I C I N F O R M A T I O N

CLASS: CDL-B=VEH>26,000 GVWR W/VO TOWED UNIT<10,001 GVWR

LIC TYP: 1=DRIVERS LICENSE

ENDOR : H, P

ENDOR: H=HAZMAT, P=PASSENGER

MISC: CONTINUOUS LICENSE DATE 08/21/89

=====

D R I V I N G R E C O R D I N F O R M A T I O N

TYPE V/S-DATE C/R-DATE

DESCRIPTION

V/C-CODE

PTS

ACCI

01/29/99

ACCIDENT (PROPERTY DAMAGE)

REASON CODES:00004

ACCIDENT#:9040941

DAC RPT#:9-

DAC ACCT#:18651-046 DAC REF#:J6V046KKTZWFWNONE 008

DMV DATE:01/09/01 DMV ACCT#:50200

=====

V/S-DATE=Violation/Suspension Date C/R-DATE=Conviction/Reinstatement Date

UPS 0028



United Parcel Service

REFERENCE REQUEST TELEPHONE FOLLOW-UP

Company Contacted Well Fargo Date 9/13/96
 Telephone Number 847 952-2000 Person contacted Joanne
 Position or title SEC.

Enter below answers obtained to following questions:

1. Please verify the employment of Jose Andrew
 From 10-94 To present
2. Social Security Number 359-80-1956
3. What was the nature of the work? driver
4. Did the person handle money or valuable merchandise? ☐ Yes ☐ No
 If yes, were the accounts kept in order? ☐ Yes ☐ No
5. What was the person's attendance record? _____
6. How would you rate job performance? ☐ Excellent ☐ Good ☐ Fair ☐ Poor
 Comments? _____
7. How would you rate attitude? _____
8. What was the reason for leaving your employ? ☐ Laid off ☐ Resigned ☐ Discharged ☐ Other _____
9. If a driver, did this person drive: ☐ Locally ☐ Over the Road
 Type of equipment _____
10. What was this person's accident experience? _____
11. Would you rehire? ☐ Yes ☐ No.
12. Do you have any other comments regarding this person? Verified
status & position
only.

Inquiry made by [Signature]

01611214 7/92 (3350 PADS 9/95)

UPS 0029



United Parcel Service

359-80-1956

MOTOR VEHICLE DRIVER CERTIFICATION

Name ANDREU JOSEAddress 7831 WRASCHER
StreetCHICAGO
CityIL 60656
State ZipDate of Birth 6/8/1963 Employee ID# 0113260Driver's License Number A53642063163Class COL B Expiration Date 6/8/2005 State IL

- I certify that the following is a true and complete list of traffic violations (other than parking violations) for which I have been convicted or forfeited bond or collateral during the past 12 months. This list includes all violations, in private and/or commercial vehicles, that I have had charged to me in that period.
- I understand I must notify my supervisor the next business day if my driving privilege has been suspended, revoked, or cancelled, or if I have been disqualified from operating a commercial vehicle.

Date	Offense	Location	Type of Vehicle Operated
/ /			
/ /			
/ /			
/ /			

None

I further understand that if I am qualified to operate feeder equipment for United Parcel Service, I must adhere to the following regulations:

- I hold only one driver's license and that it was issued to me by my resident state,*
- I am obligated to inform both my supervisor and my resident state motor vehicle authority in writing within 30 days after a conviction of a state or local traffic law violation (excluding parking violations) or forfeiture of bond or collateral. This notification must contain my full name, license number, date of conviction, nature of violation, whether or not the violation was in a commercial vehicle, location of the offense, and my signature. If no violations are listed above, I certify that I have not been convicted or forfeited bond or collateral on account of any violation required to be listed during the past 12 months.

Date 01/14/05

Driver

[Signature]

(Signature)

United Parcel Service

NO IL 150 S. Lombard Rd.

(District)

(Address)

Addison, IL 60101

Reviewed by

Frank Behn

(Signature)

1/21/05

(Date)

Title Safety Manager

(Complies with Section 391.25 DOT regulations titled--Annual Review of Driving Record and Motor Vehicle Safety Act of 1986)

FORWARD IMMEDIATELY TO HUMAN RESOURCES DEPARTMENT FOR VERIFICATION

*Virginia and Florida still require a supplemental license for non-residents employed in that state

016205 8/87 (350 PADS 9/94)

PKG 6050

030101

UPS 0030



United Parcel Service

MOTOR VEHICLE DRIVER CERTIFICATION

Name Jose AndruAddress 1831 N Roscher Chicago IL 60656
Street City State Zip CodeDate of Birth 04/08/63 Soc Sec No 359 80 1956Driver's License Number A536-4206-3163Class B C D L B Expiration Date 04/08/10 State IL

- I certify that the following is a true and complete list of traffic violations (other than parking violations) for which I have been convicted or forfeited bond or collateral during the past 12 months. This list includes all violations, in private and/or commercial vehicles, that I have had charged to me in that period.
- I understand I must notify my supervisor the next business day if my driving privilege has been suspended, revoked, or cancelled, or if I have been disqualified from operating a commercial vehicle.

Date	Offense	Location	Type of Vehicle Operated
<u>1/1</u>	<u>NONE</u>	<u>N</u>	
<u>1/1</u>			
<u>1/1</u>			
<u>1/1</u>			

I further understand that if I am qualified to operate feeder equipment for United Parcel Service, I must adhere to the following regulations:

- I hold only one driver's license and that it was issued to me by my resident state.
 - I am obligated to inform both my supervisor and my resident state motor vehicle authority in writing within 30 days after a conviction of a state or local traffic law violation (excluding parking violations) or forfeiture of bond or collateral. This notification must contain my full name, license number, date of conviction, nature of violation, whether or not the violation was in a commercial vehicle, location of the offense, and my signature.
- If no violations are listed above, I certify that I have not been convicted or forfeited bond or collateral on account of any violation required to be listed during the past 12 months.

Date 04/27/04 Driver Jose Andru
 (Signature)
North Illinois 150 S. Lombard Rd. Address IL 60101
 (Address)
 Reviewed by Frank Beck 4/27/04 Title Health & Safety Mgr
 (Signature) (Date)

(Complies with Section 391.25 DOT regulations titled--Annual Review of Driving Record and Motor Vehicle Safety Act of 1986)

FORWARD IMMEDIATELY TO HUMAN RESOURCES DEPARTMENT FOR VERIFICATION

* Virginia and Florida still require a supplemental license for non-residents employed in that state

016205 8/87 (350 PAD\$ 9/94)

030101

UPS 0031



MOTOR VEHICLE DRIVER CERTIFICATION

Name JOSE ANDREU
 Address 7831 W AUGUSTA CHICAGO IL 60656
Street City State Zip Code
 Date of Birth 06/08/63 Soc Sec No 354-80-1956
 Driver's License Number A536-4206-3163
 Class B Expiration Date 06/08/05 State IL

- I certify that the following is a true and complete list of traffic violations (other than parking violations) for which I have been convicted or forfeited bond or collateral during the past 12 months. This list includes all violations, in private and/or commercial vehicles, that I have had charged to me in that period.
- I understand I must notify my supervisor the next business day if my driving privilege has been suspended, revoked, or cancelled, or if I have been disqualified from operating a commercial vehicle.

Date	Offense	Location	Type of Vehicle Operated
<u>1/1</u>	<u>NO FINE</u>		
<u>1/1</u>			
<u>1/1</u>			
<u>1/1</u>			

I further understand that if I am qualified to operate feeder equipment for United Parcel Service, I must adhere to the following regulations:

- I hold only one driver's license and that it was issued to me by my resident state.*
 - I am obligated to inform both my supervisor and my resident state motor vehicle authority in writing within 30 days after a conviction of a state or local traffic law violation (excluding parking violations) or forfeiture of bond or collateral. This notification must contain my full name, license number, date of conviction, nature of violation, whether or not the violation was in a commercial vehicle, location of the offense, and my signature.
- If no violations are listed above, I certify that I have not been convicted or forfeited bond or collateral on account of any violation required to be listed during the past 12 months.

Dated 06/04 Driver JOSE ANDREU
(Signature)
NORTH ILLINOIS 150 S. LOMBARD RD ADDISON IL 60101
(Branch) (Address)
 Reviewed by FRANK BERTSCH 3/5/04 Title HEALTH & SAFETY MGR.
(Signature) (Date)

(Complies with Section 391.25 D O T regulations titled--Annual Review of Driving Record and Motor Vehicle Safety Act of 1986)

FORWARD IMMEDIATELY TO HUMAN RESOURCES DEPARTMENT FOR VERIFICATION

*Virginia and Florida still require a supplemental license for non-residents employed in that state

016205 8/87 (350 PADS 9/94)

030101

UPS 0032

6050



United Parcel Service

MOTOR VEHICLE DRIVER CERTIFICATION

Name Jose Andrade
 Address 7831 W Roscher CHICAGO IL 60656
Street City State Zip Code
 Date of Birth 06/08/63 Soc Sec No 859-801956
 Driver's License Number A536 4206 3163

Class BDL B Expiration Date 06/08/08 State IL

- I certify that the following is a true and complete list of traffic violations (other than parking violations) for which I have been convicted or forfeited bond or collateral during the past 12 months. This list includes all violations, in private and/or commercial vehicles, that I have had charged to me in that period.
- I understand I must notify my supervisor the next business day if my driving privilege has been suspended, revoked, or cancelled, or if I have been disqualified from operating a commercial vehicle.

Date	Offense	Location	Type of Vehicle Operated
<u>1/1</u>	<u>0</u>	<u></u>	<u></u>
<u>1/1</u>	<u></u>	<u></u>	<u></u>
<u>1/1</u>	<u></u>	<u></u>	<u></u>
<u>1/1</u>	<u></u>	<u></u>	<u></u>

I further understand that if I am qualified to operate feeder equipment for United Parcel Service, I must adhere to the following regulations:

- I hold only one driver's license and that it was issued to me by my resident state.*
- I am obligated to inform both my supervisor and my resident state motor vehicle authority in writing within 30 days after a conviction of a state or local traffic law violation (excluding parking violations) or forfeiture of bond or collateral. This notification must contain my full name, license number, date of conviction, nature of violation, whether or not the violation was in a commercial vehicle, location of the offense, and my signature. If no violations are listed above, I certify that I have not been convicted or forfeited bond or collateral on account of any violation required to be listed during the past 12 months.

Date 4/1/04 Driver Jose Andrade
North ILLINOIS 150 S LOMBARD Rd Addison IL 60101
(Address)
 Reviewed by Mark Seckley 4-2-04 Title Health & Safety Mgr
(Signature) (Date)

(Complies with Section 391.25 DOT regulations titled—Annual Review of Driving Record and Motor Vehicle Safety Act of 1986)

FORWARD IMMEDIATELY TO HUMAN RESOURCES DEPARTMENT FOR VERIFICATION

*Virginia and Florida still require a supplemental license for non-residents employed in that state

016203 8/87 (350 FADS 9/94)

030101

UPS 0033



United Parcel Service

MOTOR VEHICLE DRIVER CERTIFICATION

Name Tara AndrewAddress 7831 W Roscher Chicago IL 60641Date of Birth 06/08/63 Soc. Sec. No. 359 801956Driver's License: Number A536-4206-3163Class C DL-C Expiration Date 06/08/07 State IL

- I certify that the following is a true and complete list of traffic violations (other than parking violations) for which I have been convicted or forfeited bond or collateral during the past 12 months. This list includes all violations, in private and/or commercial vehicles, that I have had charged to me in that period.
- I understand I must notify my supervisor the next business day if my driving privilege has been suspended, revoked, or cancelled, or if I have been disqualified from operating a commercial vehicle.

<u>Date</u>	<u>Offense</u>	<u>Location</u>	<u>Type of Vehicle Operated</u>
<u> / / </u>	<u> </u>	<u> </u>	<u> </u>
<u> / / </u>	<u> </u>	<u> </u>	<u> </u>
<u> / / </u>	<u> </u>	<u> </u>	<u> </u>
<u> / / </u>	<u> </u>	<u> </u>	<u> </u>

I further understand that if I am qualified to operate feeder equipment for United Parcel Service, I must adhere to the following regulations:

- I hold only one driver's license and that it was issued to me by my resident state;*
- I am obligated to inform both my supervisor and my resident state motor vehicle authority in writing within 30 days after a conviction of a state or local traffic law violation (excluding parking violations) or forfeiture of bond or collateral. This notification must contain my full name, license number, date of conviction, nature of violation, whether or not the violation was in a commercial vehicle, location of the offense, and my signature.

If no violations are listed above, I certify that I have not been convicted or forfeited bond or collateral on account of any violation required to be listed during the past 12 months.

Date 10/16/07Driver Tara Andrew

UNITED PARCEL SERVICE—

Reviewed By: / / Title:

(Complies with Section 391.25 D.O.T. regulations titled—Annual Review of Driving Record and Motor Vehicle Safety Act of 1986.)

FORWARD IMMEDIATELY TO PERSONNEL DEPARTMENT FOR VERIFICATION.

*Virginia and Florida still require a supplemental license for non-residents employed in that state.

016205 8/87 (1350 Page 3/94)

UPS 0034

A536-4206-3163-0 AB279
06 13 03

PURSUANT TO THE PROVISIONS OF THE ILLINOIS VEHICLE CODE, THE FOLLOWING INFORMATION IS
FURNISHED FROM THE DRIVER'S LICENSE FILE OF THE PERSON IDENTIFIED ABOVE

A536-4206-3163-0

JOSE ANDREU
7831 W RASCHER
CHICAGO 60656

SEX	HEIGHT	WEIGHT	HAIR	EYES	DATE OF BIRTH	CLASS	ENDORS	RESTRICTION	EXPIRATION DATE
M	5	05	160	BLK	BRN	Y	1	B	06 08 06
					08 21 89 05 30 01 06 08 06 06 08 06 06 08 06				

TYPE OF ACTION	DATE OF ARREST	EFFECTIVE DATE OF ACTION	DESCRIPTION OF ACTION	ADDRESS OR TRAIL NO	TERMINATION DATE OF ACTION
* END OF RECORD					

This is to certify that to the best of my knowledge and belief, after a careful search of the records of the Department of Transportation, the information set out herein is a true and accurate copy of the captioned individual's record as maintained by the Department of Transportation, and that all statutory notices required as a result of any driver control actions have been properly given.

02/14/06
SSN: 359-80-1956



Deane White
Secretary of State

(SEE REVERSE FOR EXPLANATION OF CODES AND COLUMN HEADINGS)

44-38861-1017
A538-4206-3153-0 A5314

IDENTIFIED ABOVE
AG 88-4206-3163-0

CONT. LAC. DATE			RELEASE DATE			BIRTH DATE		
08	21	89	06	04	95	06	08	63

					08/21/89		06/04/96		06/08/93	
DOB	HEIGHT	WEIGHT	HAIR	EYES	SEX	DOB	CLASS	SCHOOL	RESTRICTION	SIGNATURE DATE
M	5'05	135	BLK	BRN		Y	3	C*	P**	L***** 06/08/97

TYPE OF ACTION	DATE OF ARREST	EFFECTIVE DATE OF ACTION	DESCRIPTION OF ACTION	ACCIDENT OR TICKET NO.	TERMINATION DATE OF ACTION	STOP IN EFFECT
NO CONVICTIONS ON RECORD						
* END OF RECORD *						

George H Ryan

Secretary of State

(SEE REVERSE FOR EXPLANATION OF CODES AND COLUMN HEADINGS)



United Parcel Service 100 South Lombard Rd., Addison, IL 60101
(708) 628-3737

Dear Sir:

We the Consolidated Employment Department are considering for employment the person named below for a position with our company. We shall appreciate your help by informing us of any criminal record he/she may have in your area.

Department of Transportation, Motor Carrier Safety Regulations, Section 391.15 require that we, as a carrier, determine if the employee has any felony convictions, or has been involved in the illegal sale and use of alcohol, drugs, or narcotics that may tend to demonstrate his/her unfitness to drive a vehicle in interstate commerce.

All information will be held in strictest confidence for our own use and benefit, without prejudice or liability on our part. A stamped, self-addressed envelope is enclosed for your convenience.

Respectfully,

United Parcel Service

Juan E. Chavez
Juan Chavez
Human Resources Manager
North IL District

I hereby authorize the Police and/or Sheriff's Department for the county of Cook to furnish United Parcel Service, Inc. all information regarding convictions that may be contained in my records and do hereby release the Police and/or Sheriff's Department referenced above and all individuals connected therewith from all liability for any damage whatsoever incurred in furnishing such information.

PLEASE PRINT

Name: Jose Andres Maiden Name: Carrasco
Present Address, City, Zip: 7831 W Roscher Chicago IL 60654
Place of Birth, City, State: MEXICO G.B.O Sex: M
Social Security No.: 359 80 1956 Height: 5-5 Weight: 160
Driver's License No.: A536-4206-3163
Date: 09-10-96 Signature: *[Signature]*

FELONY CONVICTIONS

DATE	NAME	CHARGE	DISPOSITION

FOR OFFICE USE ONLY

AC
DOB: 6-8-63
Date of offer: 9-11-96
By: M.A. Carrasco

Work Location

Job Information

Job Labor

Salary Plan

Physical Exam

ANDREU,JOSE

Employee

EmplID: 0113260

Physical Exam Data

Find | View All

First 1 of 1 Last

*Exam Date: 01/01/1907

*Exam Type: DOT - Department of Transport

Next Exam: 04/13/2006

Waiver: ☐Physician ID:

Country: USA United States

Address:

[Edit Address](#)Phone:

Save

Return to Search

Notify

Previous tab

Next tab

[Work Location](#) | [Job Information](#) | [Job Labor](#) | [Salary Plan](#) | [Physical Exam](#)

UPS 0038

[Name History](#)[Address History](#)[Personal History](#)[Identity/Diversity](#)

ANDREU,JOSE

Employee

EmplID: 0113260

Address Type

Address Type: HOME

Address History

Find | View All

First 1 of 1 Last

*Effective Date: 03/10/2000

*Status:

Active

Country:

USA

United States

Address:

7831 W RASCHER

CHICAGO, IL 60656

Edit Address

Phones

*Phone Type

Telephone

Customize | Find |

First 1 of 1 Last

Main

312/631-2306

Email Addresses

*Email Type

*Email Address

Customize | Find |

First 1 of 1 Last

Save

Return to Search

Notify

Previous tab

Next tab

Refresh

[Name History](#) | [Address History](#) | [Personal History](#) | [Identity/Diversity](#)

UPS 0039

[Name History](#)[Address History](#)[Personal History](#)[Identity/Diversity](#)

ANDREU,JOSE

Employee

EmplID: 0113260

Personal Data

Find | View All

First 1 of 1 Last

*Effective Date: 03/10/2000

*Gender: Male

Alternate Employee ID:

*Highest Education Level: A-Not Indicated

☐ Student?

Language Code: English

*Marital Status: Married

As of:

☐ Smoker

As of:

USA

Save

Return to Search

Notify

Previous tab

Next tab

Refresh

[Name History](#) | [Address History](#) | [Personal History](#) | [Identity/Diversity](#)

UPS 0040

Name History Address History Personal History Identity/Diversity

ANDREU,JOSE

Employee

EmplID: 0113260

Date of Birth: 06/08/1963

Birth Country:

Age: Years 42 Months 8

Date of Death:

Birth Location:

☒ Waive Data Protection

Original Hire Date: 09/18/1996

Non-Employee Start Date:

▼ Referral Source

Find | View All First 1 of 1 Last

Effective Date: 02/17/2006

Referral Source: Unknown Referral Source Detail:

Employee Referral ID:

Specific Referral Source:

☒ Applicant is a family member

☒ Previously Employed by Company

▼ National ID

Customize | Find | View All | First 1 of 1 Last

Country	National ID Type	Description
USA	PR	Social Security Number

National ID
359-80-1956

Primary ID
<input checked="" type="checkbox"/>

► USA

Save Return to Search Notify Previous tab Next tab Refresh

Name History | Address History | Personal History | Identity/Diversity

UPS 0041

Exhibit 10

Jose Andreu UPS Payroll History Report, UPS 0674 - 0705

TEST

Page 1 of 18

Sent using CRESTPOINT SERVICES RViewer Report Viewing System (Ver 1.6.0.0)
 Copyright 1998-2005, Crestpoint Services, Dallas, Texas
 N845SPEC RUN DATE: 05/30/2007 RUN TIME: 20:06:00
 0246 NORTH ILLINOIS 0246

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 N845SPEC ERROR MSG REPORT

EMPLOYEE ID. NO.	USER REFERENCE	MESSAGE NUMBER	MESSAGE SEVERITY	MESSAGE TEXT
		98-462	INFORMATIONAL	UPS - SUCCESSFUL CREATION OF SPEC CARDS FOR PAYROLL HI:

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 780.88 TOTAL GRS: 1,027.65 FWT GRS: 1,027.65 FICA C/QPP GR:
 A 2004 4Y MEDICARE GRS: 1,027.65 ST/QWT GRS: 1,027.65 RTR GRS: 1,027.65 FUT GR:
 12/31/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 053 END 12/25/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020	FICA	53.72	036	FICA MEDICARE	14.90	022	FEDER
025	ST TAX-XX	30.83	251	UNIONDUE	0.00	069	DESP.
067	FICA CONTRIB	63.72	C 068	MEDICARE CONTRI	14.90	C	
-----PAY-----F-S FL TIME PERI							
		0300	HOL-HOLIDAY	136.00	1 1	8.00	12/25
		0300	OTD-OVERTIME	221.85	1 1	8.70	12/25
		0300	REG-REGULAR	669.80	1 1	39.40	12/25

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 726.06 TOTAL GRS: 964.58 FWT GRS: 964.58 FICA C/QPP GR:
 A 1955 4Y MEDICARE GRS: 964.58 ST/QWT GRS: 964.58 RTR GRS: 964.58 FUT GR:
 12/24/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 052 END 12/18/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020	FICA	59.80	036	FICA MEDICARE	13.99	022	FEDER
025	ST TAX-XX	28.94	251	UNIONDUE	7.93	069	DESP.
067	FICA CONTRIB	59.80	C 068	MEDICARE CONTRI	13.99	C	
-----PAY-----F-S FL TIME PERI							
		0300	OTD-OVERTIME	284.58	1 1	11.16	12/18
		0300	REG-REGULAR	680.00	1 1	40.00	12/18

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

UPS 0674

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 646.06 TOTAL GRS: 856.97 FWT GRS: 856.97 FICA C/QPP GR:
 A 1862 4Y MEDICARE GRS: 856.97 ST/QWT GRS: 856.97 RTR GRS: 856.97 FUT GR:

TEST

Page 2 of 18

12/17/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 051 END 12/11/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020 FICA	53.13	036 FICA MEDICARE	12.42	022 FEDE
025 ST TAX-XX	25.71	251 UNIONDUE	7.93	069 DESP
067 FICA CONTRIB	53.13	C 068 MEDCARE CONTRI	12.42	C
		-----PAY-----F-S FL TIME PERI		
0300		OTD-OVERTIME	176.97	1 1 12/11
0300		REG-REGULAR	680.00	1 1 40.00 12/11

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
PAYROLL PROCESSING
PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS

***** ACTIVE FULL-TIME UNION- BU- SUPERV

UPS EMPL TYPE: F BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: U

STOCK UNITS PURCHASED: 0 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0

CUR PAYMENT NET PAY: 713.17 TOTAL GRS: 947.24 FWT GRS: 947.24 FICA C/QPP GR: 947.24

A 1848 4Y MEDICARE GRS: 947.24 ST/QWT GRS: 947.24 RTR GRS: 947.24 FUT GR:

12/10/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 050 END 12/04/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020 FICA	58.73	036 FICA MEDICARE	13.73	022 FEDE
025 ST TAX-XX	28.42	251 UNIONDUE	7.93	069 DESP
067 FICA CONTRIB	58.73	C 068 MEDCARE CONTRI	13.73	C
		-----PAY-----F-S FL TIME PERI		
0300		OTD-OVERTIME	267.24	1 1 10.48 12/04
0300		REG-REGULAR	680.00	1 1 40.00 12/04

BALANCE ADJUSTMENTS 2000 UNITED WAY:07 30.00

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
PAYROLL PROCESSING
PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS

***** ACTIVE FULL-TIME UNION- BU- SUPERV

UPS EMPL TYPE: F BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: U

STOCK UNITS PURCHASED: 0 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0

CUR PAYMENT NET PAY: 273.48 TOTAL GRS: 425.00 FWT GRS: 425.00 FICA C/QPP GR: 425.00

C 515871 4Y MEDICARE GRS: 425.00 ST/QWT GRS: 425.00 RTR GRS: 425.00 FUT GR:

12/13/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 917 END 12/04/04 XX

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

004 BFTAX FLEX	0.00	0	172 FLEX CREDITS	0.00	0	177 HCSA
178 C/ECSA	0.00	0	020 FICA	26.35	036 FICA	
022 FEDERAL TAX	106.25	025 ST TAX-XX	12.75	192 W/AS:		
194 W/ASSIGNMENT 3	0.00	0	196 W/ASSIGNMENT 4	0.00	0	161 A/R
162 A/R MONTHLY	0.00	0	150 INIT FEE-****	0.00	0	151 UNIO
251 UNIONDUE	0.00	0	023 ADL FED TAX	0.00	0	026 ADL
072 APTAX FLEX	0.00	0	005 PERSONAL INS	0.00	0	153 DRIV
154 UNITED WAY '06	0.00	0	176 UPSFAC CONTRIB	0.00	0	191 W/AS:
193 W/ASSIGN FEE 2	0.00	0	195 W/ASSIGN FEE 3	0.00	0	197 W/AS:
067 FICA CONTRIB	26.35	C 068 MEDCARE CONTRI	6.17	C		
		-----PAY-----F-S FL TIME PERI				
2181800246PKG6050 8	0300	OFF-OPWKPAYOFF	425.00	2 2	N/A 12/04	

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
PAYROLL PROCESSING
PAYROLL HISTORY REPORT

UPS 0675

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS

***** ACTIVE FULL-TIME UNION- BU- SUPERV

UPS EMPL TYPE: F BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: U

STOCK UNITS PURCHASED: 0 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0

CUR PAYMENT NET PAY: 670.13 TOTAL GRS: 889.36 FWT GRS: 889.36 FICA C/QPP GR: 889.36

A 1772 4Y MEDICARE GRS: 889.36 ST/QWT GRS: 889.36 RTR GRS: 889.36 FUT GR:

TEST

Page 3 of 18

12/03/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 049 END 11/27/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020 FICA	55.14	036 FICA MEDICARE	12.90	022 FEDEI
025 ST TAX-XX	28.68	251 UNIONDUE	7.93	069 DESP
067 FICA CONTRIB	55.14	C 068 MEDCARE CONTRI	12.90	C
-----PAY-----F-S FL TIME PERI				
0300	HOL-HOLIDAY	272.00	1 1	11/27
0300	OTD-OVERTIME	209.36	1 1	11/27
0300	REG-REGULAR	408.00	1 1	11/27
UNITED PARCEL SERVICE				
PAYROLL PROCESSING				
PAYROLL HISTORY REPORT				

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/04 -12/31/04

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
***** ACTIVE FULL-TIME UNION- BU-
BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
STOCK UNITS PURCHASED: 0 401K PRCT: 0 UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
CUR PAYMENT NET PAY: 778.25 TOTAL GRS: 1,042.36 FWT GRS: 1,042.36 FICA C/QPP GR:
A 1732 4Y MEDICARE GRS: 1,042.36 ST/QWT GRS: 1,042.36 RTR GRS: 1,042.36 FUT GR:
11/26/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 048 END 11/20/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020 FICA	64.63	036 FICA MEDICARE	15.11	022 FEDEI
025 ST TAX-XX	31.27	251 UNIONDUE	13.57	069 DESP
067 FICA CONTRIB	64.63	C 068 MEDCARE CONTRI	15.11	C
-----PAY-----F-S FL TIME PERI				
0300	OTD-OVERTIME	310.59	1 1	11/20
0300	PIB-PROD BONUS	51.77	1 1	11/20
0300	REG-REGULAR	680.00	1 1	11/20
UNITED PARCEL SERVICE				
PAYROLL PROCESSING				
PAYROLL HISTORY REPORT				

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/04 -12/31/04

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
***** ACTIVE FULL-TIME UNION- BU-
BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
STOCK UNITS PURCHASED: 0 401K PRCT: 0 UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
CUR PAYMENT NET PAY: 633.90 TOTAL GRS: 848.22 FWT GRS: 848.22 FICA C/QPP GR:
A 1861 4Y MEDICARE GRS: 848.22 ST/QWT GRS: 848.22 RTR GRS: 848.22 FUT GR:
11/19/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 047 END 11/13/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020 FICA	52.59	036 FICA MEDICARE	12.30	022 FEDEI
025 ST TAX-XX	25.45	251 UNIONDUE	13.57	069 DESP
067 FICA CONTRIB	52.59	C 068 MEDCARE CONTRI	12.30	C
-----PAY-----F-S FL TIME PERI				
0300	OTD-OVERTIME	230.27	1 1	11/13
0300	REG-REGULAR	617.95	1 1	11/13
UNITED PARCEL SERVICE				
PAYROLL PROCESSING				
PAYROLL HISTORY REPORT				

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/04 -12/31/04

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
***** ACTIVE FULL-TIME UNION- BU-
BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
STOCK UNITS PURCHASED: 0 401K PRCT: 0 UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
CUR PAYMENT NET PAY: 623.35 TOTAL GRS: 834.02 FWT GRS: 834.02 FICA C/QPP GR:
A 1819 4Y MEDICARE GRS: 834.02 ST/QWT GRS: 834.02 RTR GRS: 834.02 FUT GR:
11/12/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 046 END 11/06/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

UPS 0676

TEST

Page 4 of 18

020 FICA 51.71 036 FICA MEDICARE 12.09 022 FEDE
 025 ST TAX-XX 25.02 251 UNIONDUE 13.57 O 069 DESP
 067 FICA CONTRIB 51.71 C 068 MEDCARE CONTRI 12.09 C
 -----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 154.02 1 1 6.04 11/06
 0300 REG-REGULAR 680.00 1 1 40.00 11/06
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREW, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 761.37 TOTAL GRS: 1,019.66 FWT GRS: 1,019.66 FICA C/QPP GR
 A 1781 4Y MEDICARE GRS: 1,019.66 ST/QMT GRS: 1,019.66 RTR GRS: 1,019.66 FUT GR
 11/05/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 045 END 10/30/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020 FICA 63.22 036 FICA MEDICARE 14.79 022 FEDE
 025 ST TAX-XX 30.59 251 UNIONDUE 13.57 O 069 DESP
 067 FICA CONTRIB 63.22 C 068 MEDCARE CONTRI 14.79 C
 -----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 339.66 1 1 13.32 10/30
 0300 REG-REGULAR 680.00 1 1 40.00 10/30
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREW, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 570.98 TOTAL GRS: 760.50 FWT GRS: 760.50 FICA C/QPP GR
 A 1742 4Y MEDICARE GRS: 760.50 ST/QMT GRS: 760.50 RTR GRS: 760.50 FUT GR
 10/29/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 044 END 10/23/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020 FICA 47.15 036 FICA MEDICARE 11.02 022 FEDE
 025 ST TAX XX 22.82 251 UNIONDUE 11.28 O 069 DESP
 067 FICA CONTRIB 47.15 C 068 MEDCARE CONTRI 11.02 C
 -----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 216.50 1 1 8.49 10/23
 0300 REG-REGULAR 544.00 1 1 32.00 10/23
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREW, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 672.64 TOTAL GRS: 897.26 FWT GRS: 897.26 FICA C/QPP GR
 A 1781 4Y MEDICARE GRS: 897.26 ST/QMT GRS: 897.26 RTR GRS: 897.26 FUT GR
 10/22/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 043 END 10/16/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020 FICA 55.64 036 FICA MEDICARE 13.02 022 FEDE
 025 ST TAX-XX 26.92 251 UNIONDUE 11.29 O 069 DESP
 067 FICA CONTRIB 55.63 C 068 MEDCARE CONTRI 13.02 C
 -----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 224.91 1 1 8.82 10/16
 0300 REG-REGULAR 672.35 1 1 39.55 10/16
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 UNITED PARCEL SERVICE

UPS 0677

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0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/04 -12/31/04PAYROLL PROCESSING
PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE

* OPERATION TYPE: PKG PACKAGE OPERATIONS

 ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 719.12 TOTAL GRS: 959.74 FWT GRS: 959.74 FICA C/QPP GR:
 A 1761 4Y MEDICARE GRS: 959.74 ST/QWT GRS: 959.74 RTR GRS: 959.74 FUT GR:
 10/15/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 042 END 10/09/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020 FICA	59.50	036 FICA MEDICARE	13.91	022 FEDEI
025 ST TAX-XX	28.79	251 UNIONDUE	11.29	069 DESP
067 FICA CONTRIB	59.50	C 068 MEDCARE CONTRI	13.91	C

0300	OTD-OVERTIME	213.18	1 1	8.36	10/09
0300	PID-PROD BONUS	66.56	1 1	2.61	10/09
0300	REG-REGULAR	680.00	1 1	40.00	10/09

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01

0246 NORTH ILLINOIS 0246

REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
PAYROLL PROCESSING
PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE

* OPERATION TYPE: PKG PACKAGE OPERATIONS

 ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 676.06 TOTAL GRS: 901.86 FWT GRS: 901.86 FICA C/QPP GR:
 A 1750 4Y MEDICARE GRS: 901.86 ST/QWT GRS: 901.86 RTR GRS: 901.86 FUT GR:
 10/08/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 041 END 10/02/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020 FICA	55.92	036 FICA MEDICARE	13.08	022 FEDEI
025 ST TAX-XX	27.06	251 UNIONDUE	11.29	069 DESP
067 FICA CONTRIB	55.92	C 068 MEDCARE CONTRI	13.08	C

0300	OTD-OVERTIME	168.05	1 1	6.59	10/02
0300	PID-PROD BONUS	53.81	1 1	2.11	10/02
0300	REG-REGULAR	680.00	1 1	40.00	10/02

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01

0246 NORTH ILLINOIS 0246

REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
PAYROLL PROCESSING
PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE

* OPERATION TYPE: PKG PACKAGE OPERATIONS

 ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 723.66 TOTAL GRS: 965.86 FWT GRS: 965.86 FICA C/QPP GR:
 A 1732 4Y MEDICARE GRS: 965.86 ST/QWT GRS: 965.86 RTR GRS: 965.86 FUT GR:
 10/01/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 040 END 09/25/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020 FICA	59.88	036 FICA MEDICARE	14.00	022 FEDEI
025 ST TAX-XX	28.98	251 UNIONDUE	11.29	069 DESP
067 FICA CONTRIB	59.88	C 068 MEDCARE CONTRI	14.00	C

0300	OTD-OVERTIME	181.05	1 1	7.10	09/25
0300	PID-PROD BONUS	104.81	1 1	4.11	09/25
0300	REG-REGULAR	680.00	1 1	40.00	09/25

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01

0246 NORTH ILLINOIS 0246

REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
PAYROLL PROCESSING
PAYROLL HISTORY REPORT

UPS 0678

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359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 697.05 TOTAL GRS: 932.96 FWT GRS: 932.96 FICA C/QPP GR:
 A 1707 3Y MEDICARE GRS: 932.96 ST/QWT GRS: 932.96 RTR GRS: 932.96 FUT GR:
 09/24/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 039 END 09/18/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 57.84 036 FICA MEDICARE 13.53 022 FEDE
 025 ST TAX-XX 27.99 251 UNIONDUE 13.43 O 069 DESP
 067 FICA CONTRIB 57.84 C 068 MEDCARE CONTRI 13.53 C
 -----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 252.96 1 1 9.92 09/18
 0300 REG-REGULAR 680.00 1 1 40.00 09/18
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 481.98 TOTAL GRS: 643.71 FWT GRS: 643.71 FICA C/QPP GR:
 A 1732 3Y MEDICARE GRS: 643.71 ST/QWT GRS: 643.71 RTR GRS: 643.71 FUT GR:
 09/17/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 038 END 09/11/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 39.91 036 FICA MEDICARE 9.34 022 FEDE
 025 ST TAX-XX 19.31 251 UNIONDUE 13.44 O 069 DESP
 067 FICA CONTRIB 39.91 C 068 MEDCARE CONTRI 9.34 C
 -----PAY-----F-S FL TIME PERI
 0300 HOL-HOLIDAY 136.00 1 1 8.00 09/11
 0300 OTD-OVERTIME 99.71 1 1 3.91 09/11
 0300 REG-REGULAR 408.00 1 1 24.00 09/11
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 715.44 TOTAL GRS: 957.70 FWT GRS: 957.70 FICA C/QPP GR:
 A 1705 3Y MEDICARE GRS: 957.70 ST/QWT GRS: 957.70 RTR GRS: 957.70 FUT GR:
 09/10/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 037 END 09/04/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 59.38 036 FICA MEDICARE 13.88 022 FEDE
 025 ST TAX-XX 28.73 251 UNIONDUE 13.44 O 069 DESP
 067 FICA CONTRIB 59.38 C 068 MEDCARE CONTRI 13.88 C
 -----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 265.20 1 1 10.40 09/04
 0300 PID-PROD BONUS 12.50 1 1 0.49 09/04
 0300 REG-REGULAR 680.00 1 1 40.00 09/04
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 PAYROLL HISTORY REPORT

UPS 0679

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U

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STOCK UNITS PURCHASED: 0 401K PRCNT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 09/03/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHD: 036 END 08/28/04 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 13.44 NO 069 DESP
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/04 -12/31/04 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCNT: 0
 CUR PAYMENT NET PAY: 771.01 TOTAL GRS: 1,028.84 FWT GRS: 1,028.84 FICA C/QPP GR:
 A 1726 3Y MEDICARE GRS: 1,028.84 ST/QWT GRS: 1,028.84 RTR GRS: 1,028.84 FUT GR:
 08/27/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHD: 035 END 08/21/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 63.79 036 FICA MEDICARE 14.92 022 FEDE
 025 ST TAX-XX 30.87 251 UNIONDUE 10.75 0 069 DESP
 067 FICA CONTRIB 63.79 C 068 MEDCARE CONTRI 14.92 C

-----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 348.84 1 1 13.68 08/21
 0300 REG-REGULAR 680.00 1 1 40.00 08/21
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/04 -12/31/04 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCNT: 0
 CUR PAYMENT NET PAY: 676.41 TOTAL GRS: 901.60 FWT GRS: 901.60 FICA C/QPP GR:
 A 1685 3Y MEDICARE GRS: 901.60 ST/QWT GRS: 901.60 RTR GRS: 901.60 FUT GR:
 08/20/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHD: 034 END 08/14/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 55.90 036 FICA MEDICARE 13.08 022 FEDE
 025 ST TAX-XX 27.05 251 UNIONDUE 10.75 0 069 DESP
 067 FICA CONTRIB 55.90 C 068 MEDCARE CONTRI 13.08 C

-----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 221.60 1 1 8.69 08/14
 0300 REG-REGULAR 680.00 1 1 40.00 08/14
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/04 -12/31/04 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCNT: 0
 CUR PAYMENT NET PAY: 648.81 TOTAL GRS: 850.00 FWT GRS: 850.00 FICA C/QPP GR:
 A 1686 3Y MEDICARE GRS: 850.00 ST/QWT GRS: 850.00 RTR GRS: 850.00 FUT GR:
 08/20/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHD: 034 END 08/14/04 W1

SEPARATE CHECK #: 1 VOLUNTARY DEDUCTIONS: N DEDUCTION SCHEDULE CODE: 4 SEPARATE CHECK

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 52.70 036 FICA MEDICARE 12.32 022 FEDE
 025 ST TAX-XX 25.50 069 DESPP REGULAR 20.00 067 FICA
 068 MEDCARE CONTRI 12.32 C

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PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

-----PAY-----F-S FL TIME PERI
 VAC-VACATION 850.00 1 1 50.00 08/28
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 UPS EMPL TYPE: F 401K PRCT: 0
 STOCK UNITS PURCHASED: 0
 CUR PAYMENT NET PAY: 754.15 TOTAL GRS: 1,006.15 FWT GRS: 1,006.15 FICA C/QPP GR:
 A 1720 3Y MEDICARE GRS: 1,006.15 ST/QWT GRS: 1,006.15 RTR GRS: 1,006.15 PUT GR:
 08/13/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 033 END 08/07/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 62.38 036 FICA MEDICARE 14.59 022 FEDE
 025 ST TAX-XX 30.18 251 UNIONDUE 10.75 0 069 DESP
 067 FICA CONTRI 62.38 C 068 MEDCARE CONTRI 14.59 C

-----PAY-----F-S FL TIME PERI
 OTD-OVERTIME 326.15 1 1 12.79 08/07
 REG-REGULAR 680.00 1 1 40.00 08/07
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 UPS EMPL TYPE: F 401K PRCT: 0
 STOCK UNITS PURCHASED: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 PUT GR:
 08/06/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 032 END 07/31/04 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 251 UNIONDUE 0.00 0 251 UNIONDUE 10.75 NO 069 DESP
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 UPS EMPL TYPE: F 401K PRCT: 0
 STOCK UNITS PURCHASED: 0
 CUR PAYMENT NET PAY: 265.17 TOTAL GRS: 340.00 FWT GRS: 340.00 FICA C/QPP GR:
 A 1750 3Y MEDICARE GRS: 340.00 ST/QWT GRS: 340.00 RTR GRS: 340.00 PUT GR:
 08/06/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 032 END 07/31/04 W1

SEPARATE CHECK #: 2 VOLUNTARY DEDUCTIONS: N DEDUCTION SCHEDULE CODE: 5 SEPARATE CHECK
 NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020 FICA 21.08 036 FICA MEDICARE 4.93 022 FEDE
 025 ST TAX-XX 10.20 069 DESPP REGULAR 20.00 067 FICA
 068 MEDCARE CONTRI 4.93 C
 -----PAY-----F-S FL TIME PERI
 VAC-VACATION 340.00 1 1 20.00 07/31
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 UPS EMPL TYPE: F

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STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 703.47 TOTAL GRS: 923.53 FWT GRS: 923.53 FICA C/QPP GR:
 A 1805 3Y MEDICARE GRS: 923.53 ST/QWT GRS: 923.53 RTR GRS: 923.53 FUT GR:
 07/30/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 031 END 07/24/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020	FICA	57.26	036	FICA MEDICARE	13.39	022	FEDER
025	ST TAX-XX	27.71	251	UNIONDUE	0.00	069	DESP
067	FICA CONTRIB	57.26	C 068	MEDCARE CONTRI	13.39	C	

			F-S FL	TIME	PERI
0300	OTD-OVERTIME	237.92	1 1	9.33	07/24
0300	PIB-PROD BONUS	5.61	1 1	0.22	07/24
0300	REG-REGULAR	680.00	1 1	40.00	07/24

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01

0246 NORTH ILLINOIS 0246

REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE

PAYROLL PROCESSING

PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE

* OPERATION TYPE: PKG PACKAGE OPERATIONS

 ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U

STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 644.00 TOTAL GRS: 857.99 FWT GRS: 857.99 FICA C/QPP GR:
 A 1743 3Y MEDICARE GRS: 857.99 ST/QWT GRS: 857.99 RTR GRS: 857.99 FUT GR:
 07/23/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 030 END 07/17/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020	FICA	53.19	036	FICA MEDICARE	12.44	022	FEDER
025	ST TAX-XX	25.74	251	UNIONDUE	10.75	069	DESP
067	FICA CONTRIB	53.19	C 068	MEDCARE CONTRI	12.44	C	

			F-S FL	TIME	PERI
0300	OTD-OVERTIME	170.34	1 1	6.68	07/17
0300	PIB-PROD BONUS	7.65	1 1	0.30	07/17
0300	REG-REGULAR	680.00	1 1	40.00	07/17

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01

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REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE

PAYROLL PROCESSING

PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE

* OPERATION TYPE: PKG PACKAGE OPERATIONS

 ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U

STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 364.22 TOTAL GRS: 481.70 FWT GRS: 481.70 FICA C/QPP GR:
 A 1767 3Y MEDICARE GRS: 481.70 ST/QWT GRS: 481.70 RTR GRS: 481.70 FUT GR:
 07/16/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 029 END 07/10/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020	FICA	29.87	036	FICA MEDICARE	6.98	022	FEDER
025	ST TAX-XX	14.45	251	UNIONDUE	10.75	069	DESP
067	FICA CONTRIB	29.87	C 068	MEDCARE CONTRI	6.98	C	

			F-S FL	TIME	PERI
0300	HOL-HOLIDAY	136.00	1 1	8.00	07/10
0300	OTD-OVERTIME	73.70	1 1	2.89	07/10
0300	REG-REGULAR	272.00	1 1	16.00	07/10

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01

0246 NORTH ILLINOIS 0246

REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE

PAYROLL PROCESSING

PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE

* OPERATION TYPE: PKG PACKAGE OPERATIONS

 ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U

STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 670.53 TOTAL GRS: 893.69 FWT GRS: 893.69 FICA C/QPP GR:
 A 1745 3Y MEDICARE GRS: 893.69 ST/QWT GRS: 893.69 RTR GRS: 893.69 FUT GR:
 07/09/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

UPS 0682

TEST

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SCHED: 028 END 07/03/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020	FICA	55.41	036	FICA MEDICARE	12.96	022	FEDER
025	ST TAX-XX	26.81	251	UNIONDUE	10.75	069	DESP
067	FICA CONTRIB	55.41	C 068	MEDICARE CONTRI	12.96	C	
-----PAY-----F-S FL TIME PERI							
0300	OTD-OVERTIME	201.45	1 1		7.90	07/03	
0300	PIB-PROD BONUS	12.24	1 1		0.48	07/03	
0300	REG-REGULAR	680.00	1 1		40.00	07/03	

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UT
 STOCK UNITS PURCHASED: 0 401K PRCNT: 0
 CUR PAYMENT NET PAY: 695.37 TOTAL GRS: 927.10 FWT GRS: 927.10 FICA C/QPP GR:
 A 1782 3Y MEDICARE GRS: 927.10 ST/QWT GRS: 927.10 RTR GRS: 927.10 FUT GR:
 07/02/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 027 END 06/26/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020	FICA	57.48	036	FICA MEDICARE	13.45	022	FEDER
025	ST TAX-XX	27.81	251	UNIONDUE	10.75	069	DESP
067	FICA CONTRIB	57.48	C 068	MEDICARE CONTRI	13.45	C	
-----PAY-----F-S FL TIME PERI							
0300	OTD-OVERTIME	227.46	1 1		8.92	06/26	
0300	PIB-PROD BONUS	19.64	1 1		0.77	06/26	
0300	REG-REGULAR	680.00	1 1		40.00	06/26	

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UT
 STOCK UNITS PURCHASED: 0 401K PRCNT: 0
 CUR PAYMENT NET PAY: 603.99 TOTAL GRS: 804.19 FWT GRS: 804.19 FICA C/QPP GR:
 A 1752 2Y MEDICARE GRS: 804.19 ST/QWT GRS: 804.19 RTR GRS: 804.19 FUT GR:
 06/25/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 026 END 06/19/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020	FICA	49.86	036	FICA MEDICARE	11.66	022	FEDER
025	ST TAX-XX	24.13	251	UNIONDUE	10.75	069	DESP
067	FICA CONTRIB	49.86	C 068	MEDICARE CONTRI	11.66	C	
-----PAY-----F-S FL TIME PERI							
0300	OTD-OVERTIME	118.07	1 1		4.63	06/19	
0300	PIB-PROD BONUS	6.12	1 1		0.24	06/19	
0300	REG-REGULAR	680.00	1 1		40.00	06/19	

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UT
 STOCK UNITS PURCHASED: 0 401K PRCNT: 0
 CUR PAYMENT NET PAY: 716.23 TOTAL GRS: 955.15 FWT GRS: 955.15 FICA C/QPP GR:
 A 1765 2Y MEDICARE GRS: 955.15 ST/QWT GRS: 955.15 RTR GRS: 955.15 FUT GR:
 06/18/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 025 END 06/12/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

UPS 0683

TEST

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020 FICA 59.22 036 FICA MEDICARE 13.85 022 FEDEI
 025 ST TAX-XX 28.65 251 UNIONDUE 10.75 O 069 DESP:
 067 FICA CONTRIB 59.22 C 068 MEDCARE CONTRI 13.85 C
 -----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 275.15 1 1 10.79 06/12
 0300 REG-REGULAR 680.00 1 1 40.00 06/12
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 IN
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 611.96 TOTAL GRS: 814.90 FWT GRS: 814.90 FICA C/QPP GR:
 A 1828 2Y MEDICARE GRS: 814.90 ST/QWT GRS: 814.90 RTR GRS: 814.90 FUT GR:
 06/11/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 024 END 06/05/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020 FICA 50.52 036 FICA MEDICARE 11.81 022 FEDEI
 025 ST TAX-XX 24.45 251 UNIONDUE 10.75 O 069 DESP:
 067 FICA CONTRIB 50.52 C 068 MEDCARE CONTRI 11.81 C
 -----PAY-----F-S FL TIME PERI
 0300 HOL-HOLIDAY 136.00 1 1 8.00 06/05
 0300 OTD-OVERTIME 134.90 1 1 5.29 06/05
 0300 REG-REGULAR 544.00 1 1 32.00 06/05
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 IN
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 606.08 TOTAL GRS: 806.99 FWT GRS: 806.99 FICA C/QPP GR:
 A 1792 2Y MEDICARE GRS: 806.99 ST/QWT GRS: 806.99 RTR GRS: 806.99 FUT GR:
 06/04/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 023 END 05/29/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020 FICA 50.03 036 FICA MEDICARE 11.70 022 FEDEI
 025 ST TAX-XX 24.21 251 UNIONDUE 10.75 O 069 DESP:
 067 FICA CONTRIB 50.03 C 068 MEDCARE CONTRI 11.70 C
 -----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 125.46 1 1 4.92 05/29
 0300 FIB-PROD BONUS 1.53 1 1 0.06 05/29
 0300 REG-REGULAR 680.00 1 1 40.00 05/29
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 IN
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 405.54 TOTAL GRS: 537.29 FWT GRS: 537.29 FICA C/QPP GR:
 A 1807 2Y MEDICARE GRS: 537.29 ST/QWT GRS: 537.29 RTR GRS: 537.29 FUT GR:
 05/28/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 022 END 05/22/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020 FICA 33.32 036 FICA MEDICARE 7.79 022 FEDEI
 025 ST TAX XX 16.12 251 UNIONDUE 10.75 O 069 DESP:
 067 FICA CONTRIB 33.32 C 068 MEDCARE CONTRI 7.79 C
 -----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 129.29 1 1 5.07 05/22

UPS 0684

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0300 REG-REGULAR 408.00 1 1 24.00 05/22
 PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/04 -12/31/04 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 636.61 TOTAL GRS: 848.05 FWT GRS: 848.05 FICA C/QPP GR:
 A 1773 2Y MEDICARE GRS: 848.05 ST/QWT GRS: 848.05 RTR GRS: 848.05 FUT GR:
 05/21/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 021 END 05/15/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 52.57 036 FICA MEDICARE 12.30 022 FEDE
 025 ST TAX-XX 25.44 251 UNIONDUE 10.75 0 069 DESP
 067 FICA CONTRIB 52.57 C 068 MEDICARE CONTRI 12.30 C
 PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 161.67 1 1 6.34 05/15
 0300 PIB-PROD BONUS 6.38 1 1 0.25 05/15
 0300 REG-REGULAR 680.00 1 1 40.00 05/15

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/04 -12/31/04 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 732.15 TOTAL GRS: 976.57 FWT GRS: 976.57 FICA C/QPP GR:
 A 1773 2Y MEDICARE GRS: 976.57 ST/QWT GRS: 976.57 RTR GRS: 976.57 FUT GR:
 05/14/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 020 END 05/08/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 60.55 036 FICA MEDICARE 14.16 022 FEDE
 025 ST TAX-XX 29.30 251 UNIONDUE 10.75 0 069 DESP
 067 FICA CONTRIB 60.55 C 068 MEDICARE CONTRI 14.16 C
 PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 296.57 1 1 11.63 05/08
 0300 REG-REGULAR 680.00 1 1 40.00 05/08

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/04 -12/31/04 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 421.48 TOTAL GRS: 558.71 FWT GRS: 558.71 FICA C/QPP GR:
 A 1774 2Y MEDICARE GRS: 558.71 ST/QWT GRS: 558.71 RTR GRS: 558.71 FUT GR:
 05/07/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 019 END 05/01/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 34.64 036 FICA MEDICARE 8.10 022 FEDE
 025 ST TAX-XX 16.76 251 UNIONDUE 10.75 0 069 DESP
 067 FICA CONTRIB 34.64 C 068 MEDICARE CONTRI 8.10 C
 PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 150.71 1 1 5.91 05/01
 0300 REG-REGULAR 408.00 1 1 24.00 05/01

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/04 -12/31/04 PAYROLL HISTORY REPORT

UPS 0685

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359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 647.35 TOTAL GRS: 848.05 FWT GRS: 848.05 FICA C/QPP GR:
 A 1739 2Y MEDICARE GRS: 848.05 ST/QWT GRS: 848.05 RTR GRS: 848.05 FUT GR:
 04/30/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 018 END 04/24/04 W1
 NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 52.58 036 FICA MEDICARE 12.30 022 FEDE
 025 ST TAX-XX 25.44 251 UNIONDUE 0.00 O 069 DESP
 067 FICA CONTRIB 52.58 C 068 MEDICARE CONTRI 12.30 C
 -----PAY-----F-S FL TIME PERI
 0300 ATTS-UPS SCHOOL 2.89 1 1 0.17 04/24
 0300 OTD-OVERTIME 234.86 1 1 9.21 04/24
 0300 REG-REGULAR 610.30 1 1 35.90 04/24
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 685.89 TOTAL GRS: 914.35 FWT GRS: 914.35 FICA C/QPP GR:
 A 1719 2Y MEDICARE GRS: 914.35 ST/QWT GRS: 914.35 RTR GRS: 914.35 FUT GR:
 04/23/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 017 END 04/17/04 W1
 NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 56.69 036 FICA MEDICARE 13.26 022 FEDE
 025 ST TAX-XX 27.43 251 UNIONDUE 10.75 O 069 DESP
 067 FICA CONTRIB 56.69 C 068 MEDICARE CONTRI 13.26 C
 -----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 233.07 1 1 9.14 04/17
 0300 PIB-PROD BONUS 1.28 1 1 0.05 04/17
 0300 REG-REGULAR 680.00 1 1 40.00 04/17
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 409.35 TOTAL GRS: 542.39 FWT GRS: 542.39 FICA C/QPP GR:
 A 1700 2Y MEDICARE GRS: 542.39 ST/QWT GRS: 542.39 RTR GRS: 542.39 FUT GR:
 04/16/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 016 END 04/10/04 W1
 NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 33.63 036 FICA MEDICARE 7.86 022 FEDE
 025 ST TAX-XX 16.27 251 UNIONDUE 10.75 O 069 DESP
 067 FICA CONTRIB 33.63 C 068 MEDICARE CONTRI 7.86 C
 -----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 118.58 1 1 4.65 04/10
 0300 PIB-PROD BONUS 15.81 1 1 0.62 04/10
 0300 REG-REGULAR 408.00 1 1 24.00 04/10
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

UPS 0686

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.

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UPS EMPL TYPE: F POLA / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 663.91 TOTAL GRS: 884.77 FWT GRS: 884.77 FICA C/QPP GR: 884.77
 A 1729 2Y MEDICARE GRS: 884.77 ST/QWT GRS: 884.77 RTR GRS: 884.77
 04/09/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 015 END 04/03/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 54.85 036 FICA MEDICARE 12.83 022 FEDE
 025 ST TAX-XX 26.54 251 UNIONDUE 10.75 0 069 DESP
 067 FICA CONTRIB 54.85 C 068 MEDCARE CONTRI 12.83 C
 -----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 197.63 1 1 7.75 04/03
 0300 FIB-PROD BONUS 7.14 1 1 0.28 04/03
 0300 REG-REGULAR 680.00 1 1 40.00 04/03

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 520.31 TOTAL GRS: 691.65 FWT GRS: 691.65 FICA C/QPP GR: 691.65
 A 1685 2Y MEDICARE GRS: 691.65 ST/QWT GRS: 691.65 RTR GRS: 691.65
 04/02/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 014 END 03/27/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 42.89 036 FICA MEDICARE 10.03 022 FEDE
 025 ST TAX-XX 20.75 251 UNIONDUE 10.75 0 069 DESP
 067 FICA CONTRIB 42.89 C 068 MEDCARE CONTRI 10.03 C
 -----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 117.30 1 1 4.60 03/27
 0300 FIB-PROD BONUS 30.35 1 1 1.19 03/27
 0300 REG-REGULAR 544.00 1 1 32.00 03/27

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 630.16 TOTAL GRS: 839.38 FWT GRS: 839.38 FICA C/QPP GR: 839.38
 A 1734 1Y MEDICARE GRS: 839.38 ST/QWT GRS: 839.38 RTR GRS: 839.38
 03/26/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 013 END 03/20/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE
 020 FICA 52.04 036 FICA MEDICARE 12.17 022 FEDE
 025 ST TAX-XX 25.18 251 UNIONDUE 10.75 0 069 DESP
 067 FICA CONTRIB 52.04 C 068 MEDCARE CONTRI 12.17 C 031 ST U
 -----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 159.38 1 1 6.25 03/20
 0300 REG-REGULAR 680.00 1 1 40.00 03/20

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 627.51 TOTAL GRS: 835.81 FWT GRS: 835.81 FICA C/QPP GR: 835.81
 A 1729 1Y MEDICARE GRS: 835.81 ST/QWT GRS: 835.81 RTR GRS: 835.81
 03/19/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

UPS 0687

TEST

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SCHED: 012 END 03/13/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020 FICA	51.82	036 FICA MEDICARE	12.12	022 FEDEI
025 ST TAX-XX	25.07	251 UNIONDUE	10.75	069 DESP:
067 FICA CONTRIB	51.82	C 068 MEDCARE CONTRI	12.12	C 031 ST U
		-----PAY-----F-S FL TIME PERI		
0300		OTD-OVERTIME	153.77	1 1 6.03 03/13
0300		PIS-PROD BONUS	2.04	1 1 0.08 03/13
0300		REG-REGULAR	680.00	1 1 40.00 03/13

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE

* OPERATION TYPE: PKG PACKAGE OPERATIONS

***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 511.78 TOTAL GRS: 680.17 FWT GRS: 680.17 FICA C/QPP GR:
 A 1704 1Y MEDICARE GRS: 680.17 ST/QWT GRS: 680.17 RTR GRS: 680.17 FUT GR:
 03/12/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 011 END 03/06/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020 FICA	42.17	036 FICA MEDICARE	9.86	022 FEDEI
025 ST TAX-XX	20.41	251 UNIONDUE	10.75	069 DESP:
067 FICA CONTRIB	42.17	C 068 MEDCARE CONTRI	9.86	C 031 ST U
		-----PAY-----F-S FL TIME PERI		
0300		OTD-OVERTIME	132.09	1 1 5.18 03/06
0300		PIS-PROD BONUS	4.08	1 1 0.16 03/06
0300		REG-REGULAR	544.00	1 1 32.00 03/06

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE

* OPERATION TYPE: PKG PACKAGE OPERATIONS

***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 627.12 TOTAL GRS: 835.30 FWT GRS: 835.30 FICA C/QPP GR:
 A 1702 1Y MEDICARE GRS: 835.30 ST/QWT GRS: 835.30 RTR GRS: 835.30 FUT GR:
 03/05/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 010 END 02/28/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020 FICA	51.79	036 FICA MEDICARE	12.11	022 FEDEI
025 ST TAX-XX	25.06	251 UNIONDUE	10.75	069 DESP:
067 FICA CONTRIB	51.79	C 068 MEDCARE CONTRI	12.11	C 031 ST U
030 FED UNEMP CONT	1.96	C		
		-----PAY-----F-S FL TIME PERI		
0300		OTD-OVERTIME	152.49	1 1 5.98 02/28
0300		PIS-PROD BONUS	2.81	1 1 0.11 02/28
0300		REG-REGULAR	680.00	1 1 40.00 02/28

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE

* OPERATION TYPE: PKG PACKAGE OPERATIONS

***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 622.00 TOTAL GRS: 828.41 FWT GRS: 828.41 FICA C/QPP GR:
 A 1683 1Y MEDICARE GRS: 828.41 ST/QWT GRS: 828.41 RTR GRS: 828.41 FUT GR:
 02/27/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 009 END 02/21/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

UPS 0688

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020 FICA 51.36 036 FICA MEDICARE 12.02 022 FEDE
 025 ST TAX-XX 24.85 251 UNIONDUE 10.75 O 069 DESP
 067 FICA CONTRIB 51.36 C 068 MEDCARE CONTRI 12.02 C 031 ST U
 030 FED UNEMP CONT 6.63 C

-----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 144.84 1 1 5.68 02/21
 0300 PIB-PROD BONUS 3.57 1 1 0.14 02/21
 0300 REG-REGULAR 680.00 1 1 40.00 02/21

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 632.44 TOTAL GRS: 842.44 FWT GRS: 842.44 FICA C/QPP GR:
 A 1660 1Y MEDICARE GRS: 842.44 ST/QWT GRS: 842.44 RTR GRS: 842.44 FUT GR:
 02/20/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 008 END 02/14/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020 FICA 52.23 036 FICA MEDICARE 12.21 022 FEDE
 025 ST TAX-XX 25.27 251 UNIONDUE 10.75 O 069 DESP
 067 FICA CONTRIB 52.23 C 068 MEDCARE CONTRI 12.21 C 031 ST U
 030 FED UNEMP CONT 6.74 C

-----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 159.38 1 1 6.25 02/14
 0300 PIB-PROD BONUS 3.06 1 1 0.12 02/14
 0300 REG-REGULAR 680.00 1 1 40.00 02/14

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 636.22 TOTAL GRS: 847.54 FWT GRS: 847.54 FICA C/QPP GR:
 A 1677 1Y MEDICARE GRS: 847.54 ST/QWT GRS: 847.54 RTR GRS: 847.54 FUT GR:
 02/13/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 007 END 02/07/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020 FICA 52.55 036 FICA MEDICARE 12.29 022 FEDE
 025 ST TAX-XX 25.43 251 UNIONDUE 10.75 O 069 DESP
 067 FICA CONTRIB 52.55 C 068 MEDCARE CONTRI 12.29 C 031 ST U
 030 FED UNEMP CONT 6.78 C

-----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 157.08 1 1 6.16 02/07
 0300 PIB-PROD BONUS 10.46 1 1 0.41 02/07
 0300 REG-REGULAR 680.00 1 1 40.00 02/07

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 625.42 TOTAL GRS: 833.00 FWT GRS: 833.00 FICA C/QPP GR:
 A 1686 1Y MEDICARE GRS: 833.00 ST/QWT GRS: 833.00 RTR GRS: 833.00 FUT GR:
 02/06/04 TAX CD: FED M00 ST-M /00 ST/P TXD-0014

SCHED: 006 END 01/31/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

UPS 0689

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020 FICA 51.64 036 FICA MEDICARE 12.08 022 FEDEI
 025 ST TAX-XX 24.99 251 UNIONDUE 10.75 O 069 DESP
 067 FICA CONTRIB 51.64 C 068 MEDCARE CONTRI 12.08 C 031 ST UI
 030 FED UNEMP CONT 6.66 C

-----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 134.13 1 1 5.26 01/31
 0300 PIB-PROD BONUS 18.87 1 1 0.74 01/31
 0300 REG-REGULAR 680.00 1 1 40.00 01/31

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI

UPS EMPL TYPE: F FULL / PART: F
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 842.98 TOTAL GRS: 842.18 FICA C/QPP GR:
 A 1696 1Y MEDICARE GRS: 842.18 ST/QWT GRS: 842.18 RTR GRS: 842.18 FUT GR:
 01/30/04 TAX CD: FED-M00 ST-M /00 ST/F TXD-0014

SCHED: 005 END 01/24/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020 FICA 52.22 036 FICA MEDICARE 12.21 022 FEDEI
 025 ST TAX-XX 25.27 251 UNIONDUE 0.00 O 069 DESP
 067 FICA CONTRIB 52.22 C 068 MEDCARE CONTRI 12.21 C 031 ST UI
 030 FED UNEMP CONT 6.74 C

-----PAY-----F-S FL TIME PERI
 0300 OTD-OVERTIME 148.41 1 1 5.82 01/24
 0300 PIB-PROD BONUS 13.77 1 1 0.54 01/24
 0300 REG-REGULAR 680.00 1 1 40.00 01/24

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE PART-TIME UNION- BU-
 BUILDING: 6034 HOME CENTER: 6034 SORT TYPE CODE: SUPERV.
 UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI

UPS EMPL TYPE: P FULL / PART: P
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 909.82 TOTAL GRS: 909.82 FICA C/QPP GR:
 A 1583 1Y MEDICARE GRS: 909.82 ST/QWT GRS: 909.82 RTR GRS: 909.82 FUT GR:
 01/23/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 004 END 01/17/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020 FICA 56.41 036 FICA MEDICARE 13.19 022 FEDEI
 025 ST TAX-XX 27.29 251 UNIONDUE 10.75 O 069 DESP
 067 FICA CONTRIB 56.41 C 068 MEDCARE CONTRI 13.19 C 031 ST UI
 030 FED UNEMP CONT 7.28 C

-----PAY-----F-S FL TIME PERI
 0311 OTD-OVERTIME 22.94 1 1 1.33 01/17
 0311 OTD-OVERTIME 223.38 1 1 8.76 01/17
 0311 REG-REGULAR 34.50 1 1 3.00 01/17
 0311 REG-REGULAR 629.00 1 1 37.00 01/17

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE PART-TIME UNION- BU-
 BUILDING: 6034 HOME CENTER: 6034 SORT TYPE CODE: SUPERV.
 UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI

UPS EMPL TYPE: P FULL / PART: P
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 698.62 TOTAL GRS: 698.62 FICA C/QPP GR:
 A 1572 1Y MEDICARE GRS: 698.62 ST/QWT GRS: 698.62 RTR GRS: 698.62 FUT GR:
 01/16/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 003 END 01/10/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

UPS 0690

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020	FICA	43.31	036	FICA MEDICARE	10.13	022	FEDE
025	ST TAX-XX	20.96	251	UNIONDUE	10.75	0	069 DESP
067	FICA CONTRIB	43.31	C 068	MEDCARE CONTRI	10.13	C	031 ST U
030	FED UNEMP CONT	5.59	C				

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/04 -12/31/04

0311	OTD-OVERTIME	40.04	1	1	1.57	01/10
0311	REG-REGULAR	658.58	1	1	38.74	01/10

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE PART-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: P UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 STOCK UNITS PURCHASED: 0 401K PRCNT: 0
 CUR PAYMENT NET PAY: 301.30 TOTAL GRS: 399.08 FWT GRS: 399.08 FICA C/QPP GR:
 A 1663 1Y MEDICARE GRS: 399.08 ST/QWT GRS: 399.08 RTR GRS: 399.08 PUT GR:
 01/09/04 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 002 END 01/03/04 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 271071321 ACCOUNT: 8344126309 TYPE

020	FICA	24.75	036	FICA MEDICARE	5.79	022	FEDE
025	ST TAX-XX	11.97	251	UNIONDUE	10.75	0	069 DESP
067	FICA CONTRIB	24.75	C 068	MEDCARE CONTRI	5.79	C	031 ST U
030	FED UNEMP CONT	3.19	C				

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:06:01

0311	HOL-HOLIDAY	136.00	1	1	8.00	01/03
0311	OTD-OVERTIME	101.24	1	1	3.97	01/03
0311	REG-REGULAR	24.86	1	1	N/A	01/03
0311	REG-REGULAR	51.98	1	1	4.52	01/03
0311	REG-REGULAR	85.00	1	1	5.00	01/03

UNITED PARCEL SERVICE

UPS 0691

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PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/05 -12/31/05

UNITED PARCEL SERVICE
PAYROLL PROCESSING
PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
***** ACTIVE FULL-TIME UNION- BU-
BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
STOCK UNITS PURCHASED: 0 401K PRCNT: 0
CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
4Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
11/10/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
SCHED: 045 END [REDACTED] W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE [REDACTED] NO 069 DESP.
PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
***** LV W/ PAY03/09/05 FULL-TIME UNION- BU-
BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
STOCK UNITS PURCHASED: 0 401K PRCNT: 0
CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
4Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
11/04/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
SCHED: 044 END [REDACTED] W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP.
PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
***** LV W/ PAY03/09/05 FULL-TIME UNION- BU-
BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
STOCK UNITS PURCHASED: 0 401K PRCNT: 0
CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
4Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
10/28/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
SCHED: 043 END [REDACTED] W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP.
PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
***** ACTIVE FULL-TIME UNION- BU-
BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
STOCK UNITS PURCHASED: 0 401K PRCNT: 0
CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
4Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
10/21/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
SCHED: 042 END 10 [REDACTED] W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

UPS 0692

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251 UNIONDUE 0.00 0 251 UNIONDUE 25.00 NO 069 DESP.
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 649.10 TOTAL GRS: 850.00 FWT GRS: 850.00 FICA C/QPP GR:
 A 789 4Y MEDICARE GRS: 850.00 ST/QWT GRS: 850.00 RTR GRS: 850.00 FUT GR:
 10/21/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 042 END 10/15/05 W1
 SEPARATE CHECK #: 2 VOLUNTARY DEDUCTIONS: N DEDUCTION SCHEDULE CODE: 5 SEPARATE CHECK
 NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020 FICA	52.70	036 FICA MEDICARE	12.32	022 FEDE
025 ST TAX-XX	25.50	069 DESPP REGULAR	20.00	067 FICA
068 MEDCARE CONTRI	12.32	C 031 ST UNEMP CONTR	18.70	C
-----PAY-----			F-S FL	TIME PERI
VAC-VACATION			1 1	50.00 10/29

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/05 -12/31/05
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 4Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 10/14/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 041 END 10/08/05 W1
 NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 25.00 NO 069 DESP.
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 4Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 10/07/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 040 END 10/01/05 W1
 NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 25.00 NO 069 DESP.
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** LV W/ PAY03/09/05 FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 09/30/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 039 END 09/24/05 W1

UPS 0693

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NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP:
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 09/23/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 038 END 09/17/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP:
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** LV W/ PAY03/09/05 FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 09/16/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 037 END 09/10/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP:
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 09/09/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 036 END 09/03/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP:
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 649.09 TOTAL GRS: 850.00 FWT GRS: 850.00 FICA C/QPP GR:
 A 2015 3Y MEDICARE GRS: 850.00 ST/QWT GRS: 850.00 RTR GRS: 850.00 FUT GR:
 09/09/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 016 END 09/03/05 W1

SEPARATE CHECK #: 2 VOLUNTARY DEDUCTIONS: N DEDUCTION SCHEDULE CODE: 3 SEPARATE CHECK

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

UPS 0694

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020 FICA 52.70 036 FICA MEDICARE 12.33 022 FEDE
 025 ST TAX-XX 25.50 069 DESPP REGULAR 20.00 067 FICA
 068 MEDCARE CONTRI 12.33 C 031 ST UNEMP CONTR 18.70 C
 -----PAY-----F-S FL TIME PERI
 0300 OPW-OPTIONWEEK 850.00 1 1 50.00 09/17
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREW, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 23.04 FWT GRS: 23.04 FICA C/QPP GR:
 A 162 3Y MEDICARE GRS: 23.04 ST/QWT GRS: 23.04 RTR GRS: 0.00 FUT GR:
 08/30/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 929 END 08/31/05 XX

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

122 SALES LEAD NET 15.00 O 020 FICA 1.43 036 FICA
 022 FEDERAL TAX 5.76 025 ST TAX-XX 0.52 067 FICA
 068 MEDCARE CONTRI 0.33 C 031 ST UNEMP CONTR 0.51 C 025 ST T
 -----PAY-----F-S FL TIME PERI
 7091860246PKG6050 0 0300 SLI-SALESLEAD 23.04 2 2 N/A 08/31
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREW, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** LV W/ PAY03/09/05 FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 09/02/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 035 END 08/27/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP.
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREW, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 08/26/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 034 END 08/20/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP.
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREW, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** LV W/ PAY03/09/05 FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:

UPS 0695

TEST

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3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
08/19/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 033 END 08/13/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP:
PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
***** LV W/ PAY03/09/05 FULL-TIME UNION- BU-
BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
STOCK UNITS PURCHASED: 0 401K PRCT: 0
CUR PAYMENT NET PAY: 649.09 TOTAL GRS: 850.00 FWT GRS: 850.00 FICA C/QPP GR:
A 2018 3Y MEDICARE GRS: 850.00 ST/QWT GRS: 850.00 RTR GRS: 850.00 FUT GR:
08/19/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 033 END 08/13/05 W1

SEPARATE CHECK #: 2 VOLUNTARY DEDUCTIONS: N DEDUCTION SCHEDULE CODE: 4 SEPARATE CHECK

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020 FICA 52.70 036 FICA MEDICARE 12.33 022 FEDE
025 ST TAX-XX 25.50 069 DESFP REGULAR 20.00 067 FICA
068 MEDCARE CONTRI 12.33 C 031 ST UNEMP CONTR 18.70 C

-----PAY-----F-S FL TIME PERI:
VAC-VACATION 850.00 1 1 50.00 08/27

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/05 -12/31/05
UNITED PARCEL SERVICE
PAYROLL PROCESSING
PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
***** ACTIVE FULL-TIME UNION- BU-
BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
STOCK UNITS PURCHASED: 0 401K PRCT: 0
CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
08/12/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 032 END 08/06/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP:
PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
***** LV W/ PAY03/09/05 FULL-TIME UNION- BU-
BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
STOCK UNITS PURCHASED: 0 401K PRCT: 0
CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
08/05/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 031 END 07/30/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP:
PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
***** ACTIVE FULL-TIME UNION- BU-
BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U

UPS 0696

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STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR: 0.00
 3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR: 0.00
 07/29/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 030 END 07/23/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 25.00 NO 069 DESP:
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** LV W/ PAY03/09/05 FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR: 0.00
 3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR: 0.00
 07/22/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 029 END 07/16/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 25.00 NO 069 DESP:
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR: 0.00
 3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR: 0.00
 07/15/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 028 END 07/09/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 25.00 NO 069 DESP:
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR: 0.00
 3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR: 0.00
 07/08/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 027 END 07/02/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 25.00 NO 069 DESP:
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR: 0.00
 3Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR: 0.00

UPS 0697

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07/01/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 026 END 06/25/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 25.00 NO 069 DESP:
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 2Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 06/24/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 025 END 06/18/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 25.00 NO 069 DESP:
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 2Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 06/17/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 024 END 06/11/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

069 DESPP REGULAR 20.00 NO
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 2Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 06/10/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 023 END 06/04/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 25.00 NO 069 DESP:
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE
 0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 2Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 06/03/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 022 END 05/28/05 W1

UPS 0698

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NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP:

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE

0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING

REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS

***** ACTIVE FULL-TIME UNION- BU-

BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV

UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U

STOCK UNITS PURCHASED: 0 401K PRCT: 0

CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:

2Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:

05/27/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 021 END 05/21/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP:

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE

0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING

REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS

***** ACTIVE FULL-TIME UNION- BU-

BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV

UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U

STOCK UNITS PURCHASED: 0 401K PRCT: 0

CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:

2Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:

05/20/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 020 END 05/14/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP:

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE

0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING

REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS

***** LV W/ PAY03/09/05 FULL-TIME UNION- BU-

BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV

UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U

STOCK UNITS PURCHASED: 0 401K PRCT: 0

CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:

2Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:

05/13/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 019 END 05/07/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 O 251 UNIONDUE 25.00 NO 069 DESP:

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06 UNITED PARCEL SERVICE

0246 NORTH ILLINOIS 0246 PAYROLL PROCESSING

REPORT PERIOD 01/01/05 -12/31/05 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS

***** LV W/ PAY03/09/05 FULL-TIME UNION- BU-

BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV

UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U

STOCK UNITS PURCHASED: 0 401K PRCT: 0

CUR PAYMENT NET PAY: 649.10 TOTAL GRS: 850.00 FWT GRS: 850.00 FICA C/QPP GR:

A 1993 2Y MEDICARE GRS: 850.00 ST/QWT GRS: 850.00 RTR GRS: 850.00 FUT GR:

05/13/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 019 END 05/07/05 W1

SEPARATE CHECK #: 2 VOLUNTARY DEDUCTIONS: N DEDUCTION SCHEDULE CODE: 3 SEPARATE CHECK

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

UPS 0699

TEST

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020 FICA	52.70	036 FICA MEDICARE	12.32	022 FEDEI
025 ST TAX-XX	25.50	069 DESPP REGULAR	20.00	067 FICA
068 MEDCARE CONTRI	12.32	C 031 ST UNEMP CONTR	18.70	C 030 FED I
		-----PAY-----	F-S FL	TIME PERI
	0300	VAC-VACATION	850.00	1 1 50.00 05/21

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/05 -12/31/05

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U

UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 2Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 05/06/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 018 END 04/30/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 25.00 NO 069 DESP:
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/05 -12/31/05

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U

UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 2Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 04/29/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 017 END 04/23/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 12.90 NO 069 DESP:
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/05 -12/31/05

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U

UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 2Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 04/22/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 016 END 04/16/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 12.90 NO 069 DESP:
 PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/05 -12/31/05

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV.
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U

UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 2Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 04/15/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 015 END 04/09/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

UPS 0700

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251 UNIONDUE 0.00 0 251 UNIONDUE 12.90 NO 069 DESP:
 PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246 UNITED PARCEL SERVICE
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** LV W/ PAY03/09/05 FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 UPS EMPL TYPE: F 401K PRCT: 0
 STOCK UNITS PURCHASED: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 2Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 04/08/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 014 END 04/08/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 12.90 NO 069 DESP:
 PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246 UNITED PARCEL SERVICE
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 UPS EMPL TYPE: F 401K PRCT: 0
 STOCK UNITS PURCHASED: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 2Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 04/01/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 013 END 03/26/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 12.90 NO 069 DESP:
 PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246 UNITED PARCEL SERVICE
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 UPS EMPL TYPE: F 401K PRCT: 0
 STOCK UNITS PURCHASED: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 1Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 03/25/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 012 END 03/25/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 12.75 NO 069 DESP:
 PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246 UNITED PARCEL SERVICE
 REPORT PERIOD 01/01/05 -12/31/05 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
 UPS EMPL TYPE: F 401K PRCT: 0
 STOCK UNITS PURCHASED: 0
 CUR PAYMENT NET PAY: 0.00 TOTAL GRS: 0.00 FWT GRS: 0.00 FICA C/QPP GR:
 1Y MEDICARE GRS: 0.00 ST/QWT GRS: 0.00 RTR GRS: 0.00 FUT GR:
 03/18/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014
 SCHED: 011 END 03/18/05 W1

NET PAY DISB TYPE: C CHECK/ADVICE DISTR:

251 UNIONDUE 0.00 0 251 UNIONDUE 10.75 NO 069 DESP:
 PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246 UNITED PARCEL SERVICE

UPS 0701

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0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/05 -12/31/05

PAYROLL PROCESSING
PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS

ACTIVE FULL-TIME UNION- BU-
BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
CUR PAYMENT NET PAY: 511.95 TOTAL GRS: 680.00 FWT GRS: 680.00 FICA C/QPP GR:
A 1946 1Y MEDICARE GRS: 680.00 ST/QWT GRS: 680.00 RTR GRS: 680.00 FUT GR:
03/11/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 010 END 03/15/05 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE
020 FICA 42.16 036 FICA MEDICARE 9.86 022 FEDE
025 ST TAX-XX 20.40 251 UNIONDUE 10.75 0 069 DESP
067 FICA CONTRIB 42.16 C 068 MEDCARE CONTRI 9.86 C 031 ST UI
030 FED UNEMP CONT 5.44 C

-----PAY-----F-S FL TIME PERI
REG-REGULAR 34.00 1 1 280 03/05
REG-REGULAR 646.00 1 1 38 00 03/05

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06

0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/05 -12/31/05

UNITED PARCEL SERVICE
PAYROLL PROCESSING
PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS

ACTIVE FULL-TIME UNION- BU-
BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
HANDDRAWN CK NET PAY: 0.00 TOTAL GRS: 187.00 FWT GRS: 187.00 FICA C/QPP GR:
C 999907 1Y MEDICARE GRS: 187.00 ST/QWT GRS: 187.00 RTR GRS: 187.00 FUT GR:
03/04/05 ST TXD-0014

SCHED: 009 END 03/26/05 W1

020 FICA 11.59 036 FICA MEDICARE 2.71 161 A/R
022 FEDERAL TAX 3.96 025 ST TAX-XX 3.74 067 FICA
068 MEDCARE CONTRI 2.71 C

-----PAY-----F-S FL TIME PERI
GRV-GRIEVANCE 2 2 N/A 02/25

7001010246PKG6050 @ 0300
PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06

0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/05 -12/31/05

UNITED PARCEL SERVICE
PAYROLL PROCESSING
PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS

ACTIVE FULL-TIME UNION- BU-
BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI
UPS EMPL TYPE: F STOCK UNITS PURCHASED: 0 401K PRCT: 0
CUR PAYMENT NET PAY: 486.67 TOTAL GRS: 646.00 FWT GRS: 646.00 FICA C/QPP GR:
A 1882 1Y MEDICARE GRS: 646.00 ST/QWT GRS: 646.00 RTR GRS: 646.00 FUT GR:
03/04/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 009 END 02/26/05 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE
020 FICA 40.05 036 FICA MEDICARE 9.37 022 FEDE
025 ST TAX-XX 19.38 251 UNIONDUE 10.75 0 069 DESP
067 FICA CONTRIB 40.05 C 068 MEDCARE CONTRI 9.37 C 031 ST UI
030 FED UNEMP CONT 5.17 C

-----PAY-----F-S FL TIME PERI
REG-REGULAR 646.00 1 1 38 00 02/26

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06

0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/05 -12/31/05

UNITED PARCEL SERVICE
PAYROLL PROCESSING
PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS

ACTIVE FULL-TIME UNION- BU-
BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 UI

UPS 0702

TEST

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STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 90.76 TOTAL GRS: 136.00 FWT GRS: 136.00 FICA C/QPP GR:
 A 1856 1Y MEDICARE GRS: 136.00 ST/QWT GRS: 136.00 RTR GRS: 136.00 FUT GR:
 02/25/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 008 END 02/19/05 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020	FICA	8.44	036	FICA MEDICARE	1.97	025	ST T
251	UNIONDUE	10.75	O	069 DESPP REGULAR	20.00	067	FICA
069	MEDCARE CONTRI	1.97	C	031 ST UNEMP CONTR	3.13	C	030 FED

0300

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/05 -12/31/05

REG-REGULAR 136.00 1 1 8.00 02/19
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359601956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: ILADD HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: D U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 531.61 TOTAL GRS: 706.44 FWT GRS: 706.44 FICA C/QPP GR:
 A 1856 1Y MEDICARE GRS: 706.44 ST/QWT GRS: 706.44 RTR GRS: 706.44 FUT GR:
 02/18/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 007 END 02/12/05 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020	FICA	43.80	036	FICA MEDICARE	10.24	022	FED
025	ST TAX-XX	21.19	251	UNIONDUE	10.75	O	069 DESP
067	FICA CONTRIB	43.80	C	068 MEDCARE CONTRI	10.24	C	031 ST U
030	FED UNEMP CONT	5.65	C				

0300

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/05 -12/31/05

OTD-OVERTIME 142.55 1 1 5.59 02/12
 0300 PIB-PROD BONUS 19.89 1 1 0.78 02/12
 0300 REG-REGULAR 544.00 1 1 32.00 02/12
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359601956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 616.41 TOTAL GRS: 820.51 FWT GRS: 820.51 FICA C/QPP GR:
 A 1873 1Y MEDICARE GRS: 820.51 ST/QWT GRS: 820.51 RTR GRS: 820.51 FUT GR:
 02/11/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 006 END 02/05/05 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020	FICA	50.87	036	FICA MEDICARE	11.90	022	FED
025	ST TAX-XX	24.62	251	UNIONDUE	10.75	O	069 DESP
067	FICA CONTRIB	50.87	C	068 MEDCARE CONTRI	11.90	C	031 ST U
030	FED UNEMP CONT	6.56	C				

0300

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/05 -12/31/05

OTD-OVERTIME 135.41 1 1 5.31 02/05
 0300 PIB-PROD BONUS 5.10 1 1 0.20 02/05
 0300 REG-REGULAR 680.00 1 1 40.00 02/05
 UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 293.42 TOTAL GRS: 389.13 FWT GRS: 389.13 FICA C/QPP GR:
 A 1874 1Y MEDICARE GRS: 389.13 ST/QWT GRS: 389.13 RTR GRS: 389.13 FUT GR:
 02/04/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

UPS 0703

TEST

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SCHED: 005 END 01/29/05 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020 FICA	24.12	036 FICA MEDICARE	5.64	022 FEDE
025 ST TAX-XX	11.67	251 UNIONDUE	10.75	069 DESP
067 FICA CONTRIB	24.12	C 068 MEDCARE CONTRI	5.64	C 031 ST UN
030 FED UNEMP CONT	3.11	C		

-----PAY-----F-S FL TIME PERI

0300	ATS-UPS SCHOOL	21.25	1 1	1.25	01/29
0300	OTD-OVERTIME	95.86	1 1	3.76	01/29
0300	REG-REGULAR	272.00	1 1	16.00	01/29

UNITED PARCEL SERVICE
PAYROLL PROCESSING
PAYROLL HISTORY REPORT

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/05 -12/31/05

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
***** ACTIVE FULL-TIME UNION- BU-
BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
STOCK UNITS PURCHASED: 0 401K PRCT: 0
CUR PAYMENT NET PAY: 673.02 TOTAL GRS: 896.67 FWT GRS: 896.67 FICA C/QPP GR:
A 1825 1Y MEDICARE GRS: 896.67 ST/QWT GRS: 896.67 RTR GRS: 896.67 FUT GR:
01/28/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 004 END 01/22/05 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020 FICA	55.60	036 FICA MEDICARE	13.01	022 FEDE
025 ST TAX-XX	26.90	251 UNIONDUE	10.75	069 DESP
067 FICA CONTRIB	55.60	C 068 MEDCARE CONTRI	13.01	C 031 ST UN
030 FED UNEMP CONT	7.17	C		

-----PAY-----F-S FL TIME PERI

0300	OTD-OVERTIME	219.05	1 1	8.59	01/22
0300	PIB-PROD BONUS	35.19	1 1	1.38	01/22
0300	REG-REGULAR	642.43	1 1	37.79	01/22

UNITED PARCEL SERVICE
PAYROLL PROCESSING
PAYROLL HISTORY REPORT

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/05 -12/31/05

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
***** ACTIVE FULL-TIME UNION- BU-
BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
STOCK UNITS PURCHASED: 0 401K PRCT: 0
CUR PAYMENT NET PAY: 774.54 TOTAL GRS: 1,033.18 FWT GRS: 1,033.18 FICA C/QPP GR:
A 1827 1Y MEDICARE GRS: 1,033.18 ST/QWT GRS: 1,033.18 RTR GRS: 1,033.18 FUT GR:
01/21/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

SCHED: 003 END 01/15/05 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020 FICA	64.05	036 FICA MEDICARE	14.98	022 FEDE
025 ST TAX-XX	31.00	251 UNIONDUE	10.75	069 DESP
067 FICA CONTRIB	64.05	C 068 MEDCARE CONTRI	14.98	C 031 ST UN
030 FED UNEMP CONT	8.27	C		

-----PAY-----F-S FL TIME PERI

0300	ATS-UPS SCHOOL	12.75	1 1	0.75	01/15
0300	OTD-OVERTIME	243.27	1 1	9.54	01/15
0300	PIB-PROD BONUS	109.91	1 1	4.31	01/15
0300	REG-REGULAR	667.25	1 1	39.25	01/15

UNITED PARCEL SERVICE
PAYROLL PROCESSING
PAYROLL HISTORY REPORT

PP4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
0246 NORTH ILLINOIS 0246
REPORT PERIOD 01/01/05 -12/31/05

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
***** ACTIVE FULL-TIME UNION- BU-
BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV:
UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
STOCK UNITS PURCHASED: 0 401K PRCT: 0
CUR PAYMENT NET PAY: 616.22 TOTAL GRS: 820.25 FWT GRS: 820.25 FICA C/QPP GR:
A 1773 1Y MEDICARE GRS: 820.25 ST/QWT GRS: 820.25 RTR GRS: 820.25 FUT GR:
01/14/05 TAX CD: FED-M00 ST-M /00 ST/P TXD-0014

UPS 0704

TEST

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SCHED: 002 END 01/08/05 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020	FICA	50.86	036	FICA MEDICARE	11.89	022	FEDER
025	ST TAX-XX	24.61	251	UNIONDUE	10.75	069	DESP
067	FICA CONTRIB	50.86	068	MEDICARE CONTRI	11.89	031	ST U
030	FED UNEMP CONT	6.56	C				

-----PAY-----F-S FL TIME PERI

0300	OTD-OVERTIME	196.35	1	1	7.70	01/08
0300	REG-REGULAR	623.90	1	1	36.70	01/08

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246
 REPORT PERIOD 01/01/05 -12/31/05

UNITED PARCEL SERVICE
 PAYROLL PROCESSING
 PAYROLL HISTORY REPORT

359801956 ANDREU, JOSE * OPERATION TYPE: PKG PACKAGE OPERATIONS
 ***** ACTIVE FULL-TIME UNION- BU-
 BUILDING: 6050 HOME CENTER: 6050 SORT TYPE CODE: SUPERV
 UPS EMPL TYPE: F FULL / PART: F UNION LOCAL: 0705 UNION SUB LOCAL: 0 U
 STOCK UNITS PURCHASED: 0 401K PRCT: 0
 CUR PAYMENT NET PAY: 531.12 TOTAL GRS: 746.13 FWT GRS: 746.13 FICA C/QPP GR:
 A 1815 1Y MEDICARE GRS: 746.13 ST/QWT GRS: 746.13 RTR GRS: 746.13 FUT GR:
 01/07/05 TAX CD: FED-M00 ST-M /00 ST/P TKD-0014

SCHED: 001 END 01/01/05 W1

NET PAY DISB TYPE: A CHECK/ADVICE DISTR: TRANSIT: 071000013 ACCOUNT: 1110022333988 TYPE

020	FICA	46.26	036	FICA MEDICARE	10.82	022	FEDER
025	ST TAX-XX	22.38	251	UNIONDUE	10.75	069	DESP
200	UNITED WAY'07	30.00	067	FICA CONTRIB	46.26	068	MEDC
031	ST UNEMP CONTR	17.16	C	030	FED UNEMP CONT	5.97	C

-----PAY-----F-S FL TIME PERI

0300	HOL-HOLIDAY	272.00	1	1	16.00	01/01
0300	OTD-OVERTIME	134.13	1	1	5.26	01/01
0300	REG-REGULAR	340.00	1	1	20.00	01/01

PF4700XX RUN DATE: 05/30/2007 RUN TIME: 20:05:06
 0246 NORTH ILLINOIS 0246

UNITED PARCEL SERVICE
 PAYROLL PROCESSING

UPS 0705